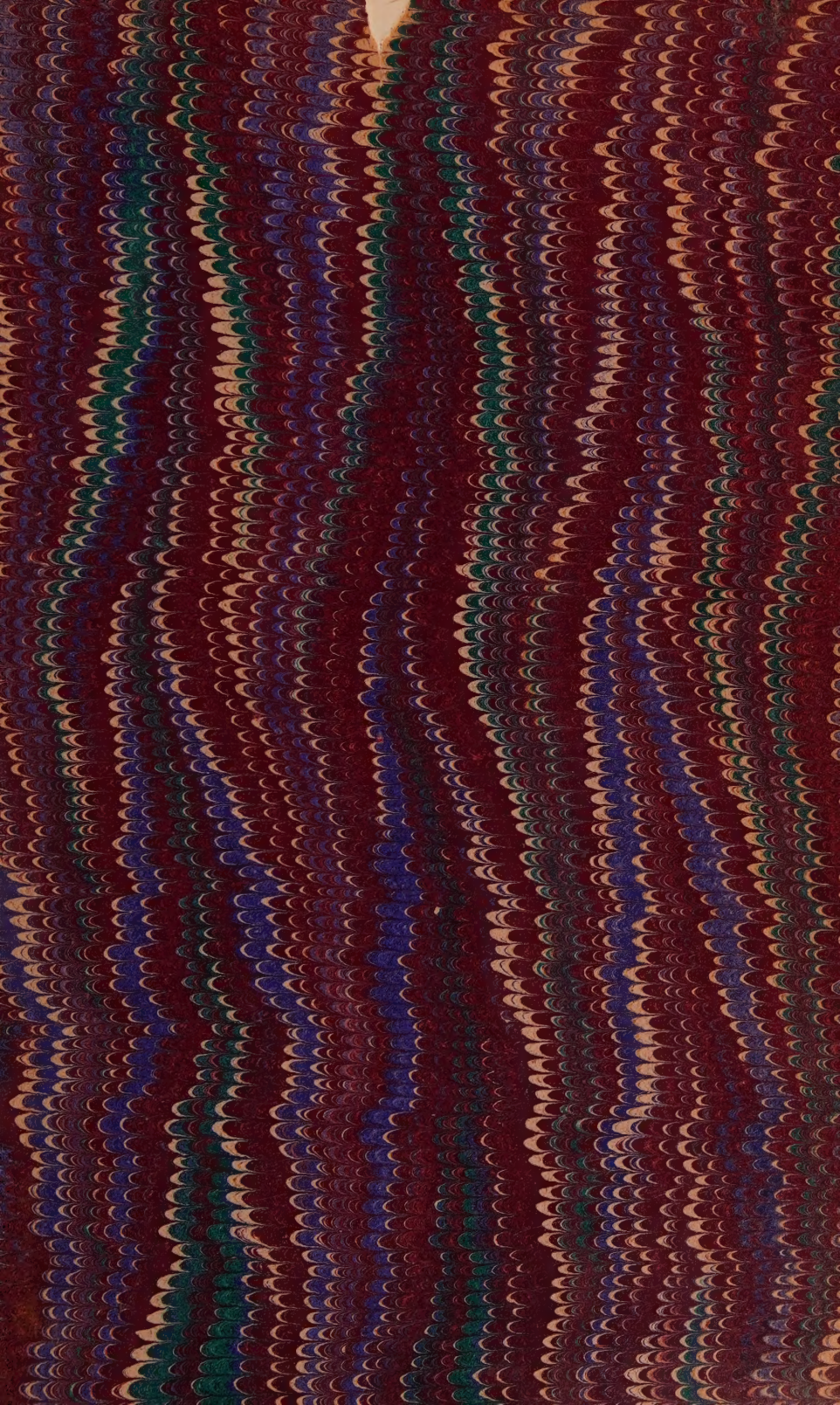


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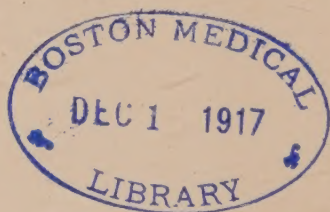


IN FOUR VOLUMES

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REPORT

OF THE

SPECIAL COMMITTEE ON INVESTIGATION
OF THE GOVERNMENT HOSPITAL
FOR THE INSANE

WITH:

HEARINGS

MAY 4-DECEMBER 13, 1906

AND DIGEST OF THE TESTIMONY

IN TWO VOLUMES

VOL. 1

Report and Part 1 of Hearings

WASHINGTON
GOVERNMENT PRINTING OFFICE
1907

MEMBERS OF SPECIAL COMMITTEE:

J. VAN VECHTEN OLCOTT, *Chairman.*

MARTIN L. SMYSER.

ANDREW J. BARCHFELD.

JAMES HAY.

ROBERT M. WALLACE.

JOHN J. FLEMING, *Clerk.*

INVESTIGATION OF GOVERNMENT HOSPITAL FOR THE INSANE.

FEBRUARY 18, 1907.—Referred to the House Calendar and ordered to be printed.

Mr. OLCOTT, from the Special Committee on Investigation of the Government Hospital for the Insane in the District of Columbia, submitted the following

REPORT.

To the House of Representatives:

The special committee appointed by the Speaker of the House, pursuant to House resolution No. 277, on April 21, 1906, as follows:

Resolved, That the Speaker of the House of Representatives be, and he is hereby, directed to appoint from the membership of the House a committee of five, with full power and whose duty it shall be to make a full and complete investigation of the management of the Government Hospital for the Insane and report their findings and conclusions to the House; said committee is empowered to send for persons and papers, to summon and compel the attendance of witnesses, to administer oaths, to take testimony and reduce the same to writing, and to employ such clerical and stenographic help as may be necessary, all expenses to be paid out of the contingent fund of the House,

hereby respectfully submits its report.

In pursuance of said resolution the Speaker appointed as such committee Messrs. Olcott, Smyser, Barchfeld, Hay, and Padgett.

On May 1, 1906, the committee organized, and on May 2 visited the Government Hospital for the Insane and made a personal inspection thereof.

Notifications to attend the first hearing were given to Hon. Frank Clark and Hon. William Sulzer, Members of the House of Representatives, who had spoken on behalf of those who had made charges against the institution, and who had appeared before the Committee on Rules prior to the time when the resolution was reported from that committee. Notices of the first hearings were also sent to Dr. C. M. Emmons and Mr. Richard P. Evans, representing the Medico-Legal Society.

On May 4, 1906, public hearings were begun.

On May 7, 1906, Hon. Robert M. Wallace was appointed a member of the committee, vice Hon. L. P. Padgett, resigned. No other changes have been made in the committee since its appointment.

The committee at its first hearing decided that the investigation should cover a period of time beginning October 1, 1903, the date of the appointment of Dr. William A. White as superintendent.

From May 4, 1906, to June 28, 1906, the committee held thirty-three public hearings, and on November 26, 27, and 28 visited the Central Islip State Hospital and the Manhattan State Hospital, in New York. A further public hearing was held on December 13, 1906.

At the first hearing the committee gave notice to Doctor Emmons and Mr. Evans, representing the Medico-Legal Society, that the committee desired to examine any witnesses named by them who could shed any light upon the charges which had been preferred, and requested them to furnish a list of witnesses they desired to have examined. A list of witnesses was furnished to the committee by these gentlemen, and such witnesses were examined.

In the examination of witnesses great latitude was given, and wherever practicable all questions suggested by the representatives of the Medico-Legal Society or persons interested in making charges against the hospital were propounded to the several witnesses. The rules of testimony in legal proceedings were not followed, the committee believing that the intent of the resolution was that a thorough investigation of all matters connected with the hospital should be had.

There were examined under oath some 287 witnesses, a great number of whom were called at the request of those who had made the charges. The others were persons who had been or were employees in the hospital, persons with whom the hospital had business relations, and a number of disinterested persons, including superintendents of institutions of similar character throughout the country and officials connected with boards of lunacy in States of the United States.

The several superintendents who were examined were all requested to make and did make an examination of the Government Hospital for the Insane before giving their testimony.

Notwithstanding the main desire on the part of the Members of the House of Representatives asking for the investigation was to cause an investigation of the charges of cruelty and ill treatment only, the committee went thoroughly into the entire question of the management of the hospital and all matters relating thereto, as directed by the resolution.

The committee submits with its report the printed copy of the testimony which, with the index, aggregates 2,010 pages, and a digest of the evidence. The committee therefore does not deem it necessary further to present details of such evidence, except to refer to some of the prominent facts bearing upon specific subjects of inquiry.

THE GOVERNMENT HOSPITAL FOR THE INSANE.

The hospital was created and is governed by laws passed by the Congress of the United States now contained in the Revised Statutes, sections 8409 to 8444. (See record, p. 1786 et seq.)

The statutes provide that there shall be in the District of Columbia a Government hospital for the insane, the objects of which shall be the most humane care and enlightened curative treatment of the insane of the Army and Navy of the United States and of the District of Columbia; that there shall be a chief executive officer of the hospital, called a superintendent, appointed by the Secretary of the Interior, who shall be entitled to a salary of \$4,000 a year; that the superintendent shall give bond for the faithful performance of his

duties, shall be a well-educated physician, possessing competent experience in the care and treatment of the insane, who shall reside on the premises and devote his whole time to the welfare of the institution and, subject to the approval of the board of visitors, engage and discharge all employees and determine their wages and duties; that he shall be the responsible disbursing agent of the institution and ex officio the secretary of the board of visitors.

The superintendent is directed to make an annual report to Congress at each regular session, which shall show in detail the receipts and expenditures for all purposes connected with the hospital for the fiscal year preceding such session. A board of visitors is provided for, consisting of nine citizens of the District to be appointed by the President, which board shall select its own president, and, subject to the approval of the Secretary of the Interior, make any needful by-laws for the government of themselves, of the superintendent and his employees, and of the patients not inconsistent with law. It is provided that the board of visitors shall visit the hospital at stated periods and exercise so careful a supervision over its expenditures and general operations that the Government and community may have confidence in the correctness of its management, and that they shall make annually to the Secretary of the Interior a report for the preceding fiscal year, setting forth the condition and wants of the institution.

Under the statutes the superintendent, upon the order of the Secretary of War, of the Secretary of the Navy, and of the Secretary of the Treasury, shall receive and keep in custody until cured, or removed by the same authority which ordered their reception, insane persons of the following descriptions: First, insane persons belonging to the Army, Navy, Marine Corps, Revenue-Cutter Service, and Public Health and Marine-Hospital Service; second, civilians employed in the Quartermaster's, Pay, and Subsistence departments of the Army who may be or may become insane while in such employment; third, men who, while in the service of the United States, in the Army, Navy, or Marine Corps, have been admitted to the hospital and have been thereafter discharged from it on the supposition that they have recovered their reason, and have, within three years after such discharge, become again insane from causes existing at the time of such discharge and have no adequate means of support; fourth, indigent insane persons who have been in either of the said services and been discharged therefrom on account of disability arising from such insanity; fifth, indigent insane persons who have become insane within three years after their discharge from such service from causes which arose during and were produced by said service.

In 1884 a statute was passed, now section 8416 of the United States Revised Statutes, providing that—

any inmate of the Soldiers' Home who is now or may become insane shall, upon an order of the president of the board of commissioners of the Soldiers' Home, be admitted to said hospital and treated therein; and the expenses of maintaining any such person shall be paid from the Soldiers' Home fund.

Section 8417 provides that—

any inmate of the National Home for Disabled Volunteer Soldiers, who may become insane, shall, upon an order of the president of the Board of Managers of the said National Home, be admitted to the Government Hospital for the Insane and treated therein * * *.

Section 8418 provides that—

upon the application of the Attorney-General, the Secretary of the Interior is authorized and directed to transfer to the Government Hospital for the Insane in the District of Columbia all persons who, having been charged with offenses against the United States, are in the actual custody of its officers, and all persons who have been or shall be convicted of any offense in a court of the United States and are imprisoned in any State prison or penitentiary of any State or Territory, and who during the term of their imprisonment have or shall become and be insane.

Section 8419 provides as follows:

If any person, charged with crime, be found, in the court before which he is so charged, to be an insane person, such court shall certify the same to the Secretary of the Interior, who may order such person to be confined in the Hospital for the Insane, and, if he be not indigent, he and his estate shall be charged with expenses of his support in the hospital.

Section 8420 provides for the transfer of insane prisoners to State hospitals when there shall not be accommodations for such persons at the Government hospital.

Section 8421 provides for the return of insane convicts restored to sanity to the prison from which the transfer was made. Section 8422 provides for the delivery to the court of insane criminals or persons charged with a crime and who have been restored to sanity. Section 8423 provides that an insane person not charged with any breach of the peace shall never be confined in the United States jail in the District of Columbia.

Section 8424 provides as follows:

All indigent insane persons residing in the District of Columbia at the time they become insane shall be entitled to the benefits of the hospital for the insane, and shall be admitted upon order of the Commissioners of the said District, which may be granted after due process of law, showing the person to be insane and unable to support himself and family or himself, if he has no family, under the visitation of insanity: *Provided*, That one-half of the expenses of the indigent patients from the District of Columbia shall be reported to the Treasury Department and charged against the appropriations to be paid toward the expenses of the District by the General Government, without regard to the date of their admission.

Sections 8425 to 8441, inclusive, providing for the admission and commitment of patients and the method of procedure in such cases are conflicting and vague. The whole subject, however, is fully discussed on page 44 hereof under the head of "Commitment."

Section 8442 provides for the manner of disbursement of moneys appropriated by Congress for the support of the hospital. Section 8443 provides for the sale or exchange of surplus products and waste material of the hospital. Section 8444 provides for the receipt and disbursement of private funds of patients.

First. As to the superintendent.—From a personal examination of the hospital and a careful investigation of its management under Dr. William A. White, superintendent, from Doctor White's own testimony and that of his medical staff, from the testimony of the attendants formerly in the employ of the institution and now employed, from the testimony of the superintendents of other similar institutions, and of other persons having knowledge of the needs of hospitals for the insane, it is the opinion of the committee that Dr. William A. White is fully qualified for the position of superintendent, is an able and distinguished alienist, and an efficient, hon-

est, and progressive manager of all of the several branches of the hospital, and a careful and humane caretaker of the patients in his charge; that he conducts the business affairs of the institution and looks after the medical and physical affairs of its inmates well and faithfully, and fills all the requirements of the statutes.

Doctor White became superintendent of the Government Hospital for the Insane on October 1, 1903, succeeding Dr. A. B. Richardson. Since he assumed the office he has systematized the method of promotion, and has made a gradual increase of the salaries of the attendants; he has created the position of clinical director, the occupant of which, among other things, has charge of all of the daily records of the patients in the institution, and in this connection has not only adopted a complete system of clinical records, but has caused to be prepared such a record of every patient in the hospital from the time of his admission; he has created the position of matron, the position of storekeeper, the position of librarian, and the position of assistant in the pathological department, all of which have materially benefited the institution and its patients. Upon his recommendation, the board of visitors approved of the appointment of a woman physician to have especial charge and supervision of the women's department of the hospital. He also instituted a system of examinations of attendants about to enter the training school, so that the standard of nurses graduating therefrom would be superior to that which obtained at the time he became superintendent.

He also, on January 27, 1904, less than four months after assuming his position, issued an order to the medical staff directing the discontinuance of the so-called bed saddle as a means of mechanical restraint.

He has, so far as the management of the buildings would permit, separated the various classes of patients—tubercular, epileptic, and criminal insane. As far as practicable, the white and black patients have been separated in their several classes.

He has inaugurated the system of the holding of meetings of the medical staff every Sunday, at which meeting scientific questions affecting the interests of the institution are discussed.

He has created and caused to be installed a system of hydrotherapeutic treatment of patients, which tends to do away with the necessity of the use of mechanical restraint in many cases.

The hospital maintains three hydrotherapeutic departments for the treatment of recent cases of mental disease and such other diseases as are known to be benefited by the systematic use of water. These departments are installed in the buildings set apart for the reception of acute cases, namely, acute psychopathic ward for white men, for white women, and for colored women, and consists of waiting rooms, a number of dressing rooms, rooms for the administration of packs, and douche rooms. The douche rooms are thoroughly equipped with the most modern apparatus and appliances used in the administration of water in the treatment of disease. The douche table is so constructed that its supply of hot, cold, and ice water is sufficient for all requirements, and the temperature of the water can be easily and quickly regulated to each degree and the pressure to each pound by means of a system of stopcocks. These rooms also contain hot-air cabinets, massage tables, sitz bath tubs, etc.

The hospital is so completely and thoroughly equipped that the

bathroom operators can carry out the hydriatic prescriptions given by physicians in charge of the departments for each individual case. Treatments are given daily to a large number of patients consisting of ablutions, affusions, sheet baths, drip sheets, wet packs (cold, warm, hot), full baths (cold—with friction—warm, hot), full baths (continuous), sitz baths, hot-air baths (local and general), medicated baths and douches (needle, rain, fan, spray, jet, spinal, and Scotch).

Plans and specifications for continuous baths in this department have been passed upon, and in a short time the system will be installed in conjunction with the acute services for men and women, thus enabling the hospital to avail itself of a form of treatment that has come to be recognized as the most modern method of administering treatments in connection with acute and violent cases of insanity.

Second. As to the medical and consulting staffs.—Of the efficiency of the medical staff there can be no doubt. The staff is composed of men who, without exception, are fitted for their duties, have proper training and education to meet the requirements of their several positions, and from the testimony the committee believes that they labor earnestly and properly care for the protection and welfare of the patients.

The work of these gentlemen is arduous. They live on the institution grounds, and are practically constantly on duty. One of them, the night medical officer, is actually on duty every night from 9 p. m. to 7 a. m., and visits the various wards during that time. He is always on call and can be found in case of disturbance in any of the wards by telephonic communication. In case of emergency he can summon other physicians.

The physicians are appointed after a competitive civil-service examination.

There are fifteen physicians, including the superintendent, on the staff, assigned to the various departments. They are entitled, with their families, to maintenance at the hospital, which the committee thinks is proper and similar to arrangements provided for in many other institutions.

To show the standing of the several members of the medical staff it should be mentioned in this report that they hold positions in medical schools and colleges as follows:

Dr. William A. White, superintendent, is professor of nervous and mental disease in Georgetown University and professor of mental disease in George Washington University. Dr. L. W. Blackburn, pathologist, is professor of morbid anatomy in Georgetown University and in George Washington University. Dr. Charles H. Clark, clinical director, is professor of nervous disease in George Washington University. Dr. Shepherd I. Franz, psychologist, is professor of physiology in George Washington University. Dr. William H. Hough, junior assistant physician, is lecturer on medical zoology in Georgetown University.

The above-named officers of the Government Hospital for the Insane conduct weekly clinics at the hospital. These are attended by students from George Washington and Georgetown universities and from the United States Naval School and the United States Army School.

Doctor Blackburn, in charge of the pathological department, is a well-known pathologist, and there is no doubt that the work which

he performs is important from a scientific standpoint. This department is devoted primarily to the study of the lesions of the brain and other organs associated with mental disease. It has three divisions, namely: (1) The division of morbid anatomy and pathological histology; (2) the division of clinical pathology, and (3) the division of photography.

The department of morbid anatomy has a well-equipped autopsy room, with an amphitheater seating about 40 students. Here are given weekly demonstrations in autopsy work and morbid anatomy, to the students of the medical departments of Georgetown and George Washington universities and to the training school for nurses of the hospital. This department has a museum in which are preserved all important pathological specimens, now numbering considerably over 1,000. The pathological histology is conducted under this division with an excellent equipment of modern instruments.

In the division of clinical pathology are made the necessary examinations for aid in diagnosis and for clinical study of the cases, and the results are filed with the case records.

In the division of photography the photographs of the patients are taken on admission and at times during the progress of the disease. These are filed with the case records and kept for reference. An important feature of this division is the photography of pathological specimens, and of these the hospital has a large collection.

The consulting staff of the hospital consists of eminent physicians in the District of Columbia, and many of them have given testimony as to their visits and treatment of patients. There is no doubt as to their efficiency.

The surgical department is also worthy of note. It has an operating amphitheater with a seating capacity for about 60. Adjoining this room and to the rear are the surgeon's room, room for instruments and dressings, and the anæsthetist's room. This department is thoroughly modern in all its appointments, the operating room being especially well equipped. The floor is of white tile, the wainscoting of white Italian marble, and the side walls and ceiling white enameled. The room is equipped with a dressing sterilizer, instrument sterilizer, sterilizers for hot and cold water, an instrument case, operating table, instrument tables, and all the various accessories necessary for a well-equipped operating room.

Surgical clinics are held frequently, and in many instances physicians and medical students of the city have attended. This amphitheater is also used in connection with the training school for nurses, recitations and demonstrations being frequently held there.

Since the investigation the committee has been informed that the superintendent has appointed a psychologist for special research work in the realm of abnormal psychology. The laboratory has been equipped with about \$3,000 worth of modern psychological apparatus and appliances, and is sufficiently well installed to take up any line of work in this field.

The psychologist is at present at work in connection and collaboration with the clinical department in outlining systematic and uniform methods of clinical examination into the mental condition of patients for the purpose of greater uniformity in the records, and also of rendering them more useful for purposes of study, statistical or otherwise.

Third. As to the charges of cruel treatment and abuse of patients.—It must be remembered that these charges have been made, in almost every case, by either a patient now in the hospital, a patient who for one reason or another has been discharged, or by a discharged or resigned employee. The committee has heard everything that can be said by all of the witnesses of any of these classes, and has given due weight to their testimony. There unquestionably have been some cases of cruelty to patients by attendants, but in no case was this sanctioned by the superintendent of the hospital or any of the medical staff, but, on the other hand, most of the witnesses have testified that, upon accepting their service, the strictest injunctions were given to them, by either the superintendent or some of the medical staff, against harshness in the treatment of patients, and also that a printed book of rules and regulations, embodying such direction was given or read to them at the beginning of their employment. Such rules are printed in the record. Not only this, but the testimony is practically unanimous that a violation of such rules was met by prompt punishment, usually by the immediate dismissal of the attendant. The testimony also shows that the following attendants were summarily dismissed for violating the rules of the institution; and particularly for abuse of patients:

Acton, Bemont Allen, Owen S. Allen, Baldwin, Barnes, Joseph W. Belt, Townsend W. Belt, Berry, Bowen, Cullinane, Green, Hall, Herbert, Hill, Hodges, Mayfield, McMurray, O'Connor, Ogden, Pendleton, Penn, Pyles, Satterfield, Spencer, Tennyson, Weedon, Wilson.

When reasonable proof of cases of cruelty has been given to the superintendent or any of his staff complaint has been made to the authorities of the District, and criminal prosecutions have been instituted at the instance of the authorities of the hospital. The average number of patients is 2,600, and of attendants who come into actual contact with patients about 300. Considering these numbers the cases of cruelty alleged are few, and the committee is of the opinion that the general treatment of the patients in the institution is satisfactory.

Superintendents of other institutions have testified that unfounded complaints of harsh treatment of patients are frequently made in most institutions for the care of the insane by the patients themselves or by their relatives.

Isolated instances where charges of cruelty have been made can be cited, but the majority of witnesses, even though criticising the retention of particular patients in the institution and complaining about the food, etc., have said that the treatment of the patients was good.

Testimony has also been given as to specific cases of abuse of patients by attendants, but in almost every one of these cases the charges have been denied in positive terms by the attendants who were charged with such abuse or by the physicians of the hospital or other employees.

Among charges that were made was that of giving patients food by means of a feeding tube, used as a method of punishment. This is not only disproved, but the testimony which sought to show this was the case was absurd.

As to the charges of so-called "towelings" of patients, there is no proof as to this alleged method of abuse. Although the witness Otis A. Wilson, a discharged attendant, swore that he himself towelled patients, from his manner and contradiction of his own statements

the committee is of opinion that this testimony is unworthy of serious consideration.

As to the charges made in regard to improper bathing of patients in the same water that had been used by other patients, it appears from the testimony that in one or two instances this had been done, but that the rule of the hospital was against it and that the rule was usually maintained. Such charges were made by two patients and two discharged attendants, and their testimony was denied by a number of witnesses. The committee therefore believes that these charges have no foundation.

After a careful examination into the charges of the abuse of patients and consideration of the testimony adduced in connection therewith, and having in mind the demeanor of the various witnesses while on the stand, the committee is of the opinion that such charges have not been sustained by the testimony.

The testimony not only of Doctor White and the gentlemen connected with his medical staff, but also of the superintendents of the institutions throughout the country, is that it is a matter of great difficulty to obtain a proper class of attendants in institutions for the insane, but that the superintendent exercises care in their selection.

Fourth. As to methods of restraint.—In the charges much talk was heard of strait-jackets. Strait-jackets in St. Elizabeth's asylum do not exist, and have not for many years. On rare occasions a garment called a camisole is used, which consists of a canvas jacket, which is laced in the back and which has long sleeves. When a patient becomes so violent that he seeks to do damage either to himself or another patient this camisole is placed upon him, so that the use of his arms is curtailed and the damage which he seeks to do, either to himself or to others, is made impossible. In the Government hospital this has been used on a few occasions, but never without the direction of a physician, and then only when it was necessary for the protection of life or limb. This method of restraint is used at other institutions, some superintendents having testified that it was a method of treatment rather than abuse. With two exceptions superintendents of other institutions said that it was necessary for the good of the patient to use some method of restraint.

The committee is convinced from the testimony that Doctor White since his appointment has made possible the lessening of this and other methods of restraint by the institution of the hydro-therapeutic treatment above described.

As to bed saddles, the use of these was discontinued upon the order of Doctor White shortly after he took office, to wit, on January 27, 1904.

As to handcuffs or straps: During the time that the members of the committee visited the institution handcuffs were used on one individual confined in the criminal ward. The handcuffs consisted of leather wristlets connected by a strap, which could under no circumstances have given any discomfort or pain to the patient. This method is proper, especially in homicidal cases.

The sheet rest is a method of tying in bed a patient whose restlessness makes it possible, if not probable, that he may fall out of bed and seriously injure himself.

As before stated, none of these is ever applied except upon the

immediate direction of a physician and then only in cases of necessity for the welfare of the patient.

The witnesses Dr. George A. Zeller and Dr. William F. Drewry, superintendents of institutions for the insane, testified as to the non-use of mechanical restraint at their respective hospitals, and stated that it was their opinion that such restraint was not necessary. There was also submitted a list of institutions, nine in number, at which it is claimed that the use of mechanical restraint is prohibited.

The committee, however, went into this question with great care and took much testimony thereon. From an examination of such testimony and after a personal inspection of the Government Hospital for the Insane, as well as several other hospitals, it not only approves of the present methods of restraint at the Government Hospital for the Insane, but deems it essential for the benefit of the patient himself and for the prevention of harm to other patients or attendants.

Fifth. As to attendants.—Altogether there are approximately 700 employees in the hospital, and of these about 300 come in contact with the patients. They work in two shifts. The attendants are on duty from 6 o'clock in the morning until 5 in the evening one day and from 6 o'clock in the morning until 8 o'clock in the evening the next day—that is, eleven hours one day and fourteen hours the next. Each of the attendants gets half a day off once a week. They get one Sunday every three weeks. The exact amount of time that they are on duty can be best described from the testimony of Doctor Clark, appearing at page 510 of the record. In forty-two days, or six weeks, each attendant is entitled to two Sundays. Six of the remaining forty days they work six hours, and the balance of thirty-four days they work fourteen hours, and an average of eleven hours the other seventeen. In other words, they work about an average of eleven hours a day—that is, without including vacations. They receive every third holiday and fifteen days vacation with pay.

All of the superintendents from other hospitals testified in regard to the hours of work, and it has been found that the average time in the several institutions is greater than that in the Government Hospital for the Insane. One of the institutions has three shifts of eight hours each, but the consensus of opinion of all the superintendents, with the one exception, is that the eight-hour system is impracticable and that the result of having three shifts instead of two shifts is prejudicial to the interests of the patients. The superintendents agree that greater success is obtained by having as few attendants in charge of particular patients as is possible, as the patients become attached to the attendants and become disturbed at frequent changes of them.

It is proper here to state, for the purpose of comparison, the situation existing at some of the hospitals, taken from the testimony.

At the State hospital at Columbus, Ohio, and the Massillon State hospital of Ohio, the hours of service of attendants are materially longer. At the Manhattan State hospital at Wards Island and the Central Islip State hospital, and all of the other New York State hospitals, the time of work is thirteen hours daily. At the Morris Plains State hospital in New Jersey the average time is fifteen hours. The Illinois Asylum for the Incurable Insane, before mentioned, is the only institution where there are the three shifts of eight hours each. It is true that the attendants are nominally on duty for eight

hours, but none of the attendants can leave the hospital after their eight hours are completed, but must remain on duty for emergency calls.

As far as the pay of the attendants is concerned, there is not a great difference between the Government hospital and other similar institutions. Generally speaking, the Government hospital leads. There are differences in the minimum pay in some cases and the maximum in others, but the difference in the pay does not seem to be greater than local conditions might warrant.

The attendants are divided into male probationers, female probationers; full attendants, both male and female; charge attendants, male and female; nurses, male and female; chief nurses, male and female; assistant supervisors, male and female; supervisors, male and female. Their salaries are as follows: The male probationers begin at \$18, the female at \$14; the male attendants receive from \$20 to \$30, the female attendants from \$15 to \$25; the male charge attendants receive from \$25 to \$35, and the female charge attendants from \$20 to \$30; the male nurses receive from \$25 to \$35, and the female nurses from \$20 to \$30; the male chief nurses receive from \$30 to \$40, and the female from \$25 to \$35; the male assistant supervisors receive from \$35 to \$50, and the female from \$30 to \$45; the male supervisors receive from \$40 to \$60, and the female supervisors from \$35 to \$55.

The chief nurses now employed in this institution are both women, and the 300 attendants above mentioned include the chief nurses and all of the others, including the probationers. It also includes a few domestics who do dining-room work, which in most of the institutions appears to be done by the attendants themselves. There are only two chief nurses, and their duty is to supervise the nurses. A charge nurse is the one that is in charge of a ward.

The appointment of all the attendants in the hospital is made directly by the superintendent, subject to the approval of the board of visitors. There is no civil-service examination except as to physical condition, special qualifications, age, and experience; but the applicant for appointment fills out an application blank on these lines, and the promotions from the lower to the higher grades are made by the administration. A training school is connected with the hospital, and the attendants when they are appointed are urged to enter the training school.

Most of the attendants live in the hospital. There are some few of them to whom permission is granted to live outside, where such permission does not interfere with the management of the institution. The preference of the administration is to have the attendants live in the hospital grounds, so that they may all be available in case of emergency. Inasmuch as the permission to live outside of the grounds is considered a privilege, these nurses do not get additional compensation. The domestics above referred to are few in number, about 12, and they do dining-room work and some general housework, to supplement that done by the attendants.

The employees (about 400 in number), besides the attendants, include the superintendent, the medical staff, the office force, the employees in the engineering department, and all others employed.

On pages 418 to 446 of the testimony will be found the pay roll as classified for the present superintendent when he took charge of

the institution, and also the pay roll as at present classified by Doctor White. The committee is of the opinion that the list of employees could not be materially decreased without injury to the institution and to the welfare of the patients, and sees no reason to recommend any especial change in the number now employed. This is a matter that is properly cared for by the superintendent, and seems to have been done with a view to accomplishing the best results for the hospital as economically as is feasible.

In regard to the relation of the number of attendants to the number of patients, the charges that have been made allege that there are not enough attendants in the Government Hospital for the Insane to properly care for the patients, and a list, showing the ratios of attendants to patients in several institutions, was submitted to the committee by Mr. R. P. Evans.

It is quite true, as stated by Mr. Evans in his testimony, that, from such list, it appears that there were more attendants in proportion to the number of patients in those several institutions than there are in the Government Hospital for the Insane; but the examination of superintendents of other institutions before the committee discloses the fact that, if anything, the Government hospital has a greater number of attendants for the same number of patients than exists generally in other institutions. For instance, the Manhattan State Hospital, in New York City, has about 1 attendant to 8 patients; the Central Islip State Hospital, of New York, has a ratio of 1 to 10; the Central State Hospital for the Colored Insane, at Petersburg, Va., has a ratio of 1 to 15; the Columbus State Hospital of Ohio has a ratio of 1 to 13; the Illinois Asylum for the Incurable Insane has a ratio of 1 to 9; the Massillon State Hospital, of Ohio, has a ratio of 1 to 15; the Morris Plains State Hospital, of New Jersey, has a ratio of 1 to 9; the Western Pennsylvania Hospital for the Insane has a ratio of 1 to 10.

The ratio at the Government Hospital for the Insane is 1 to 8.

While the several institutions mentioned in the statement submitted by Mr. Evans have a greater number of attendants, considering the number of patients, with one single exception they are institutions having a very much smaller number of patients, and it is the opinion of the committee that where there is a small number of patients there will be a greater number of attendants proportionately. For instance, if in a single ward there are only three patients, it is necessary to have at least two attendants for that number of patients, so as to provide for the service of attendants day and night.

Mr. Evans mentioned one hospital, the South Dakota Hospital for the Insane, which has only 575 patients. In this hospital, however, are 120 employees, including the attendants. It is a fair inference, and there seems to be no reasonable doubt, that these same 120 employees could care for almost double the number of patients without any failure to provide for their necessary attendance; and, generally speaking, when the size of the hospitals, the number of attendants, and the number of patients are considered, there is no reason to believe that the patients in the Government Hospital would be better served by an arbitrary increase of the number of attendants.

Sixth. As to the food.—The dietaries have been arranged with what appears to be considerable care. Besides the general dietary,

special diets are prescribed for tubercular patients and for old and feeble patients. The complete dietary is contained in the testimony of Doctor Clark, on page 522. At page 723 will be found another diet list of the hospital.

The dietary is quite similar to that in other institutions. It should be stated that the dietary of this institution is mentioned in one of the standard works on the subject, "Diet in Health and Disease," by Julius Friedenwald, M. D., clinical professor of diseases of the stomach, and John Ruhrah, M. D., clinical professor of diseases of children, in the College of Physicians and Surgeons, Baltimore, Md., in a list of dietaries in several hospitals and kindred institutions. The committee has no hesitancy in saying that, in so far as the dietary is concerned, is is healthful and sufficiently varied.

In the year 1903, and at the time when Doctor White was the superintendant of the hospital, the Department of Agriculture made a nutrition investigation at the Government Hospital for the Insane and gathered statistics during the course of such investigation. The committee quotes from the report of W. O. Atwater, chief of nutrition investigations of the Department of Agriculture, as follows:

So far as can be judged from the results of these studies, as compared with similar data obtained elsewhere, the dietetic management of the institution was very satisfactory. Opportunities for improvement were observed, but these have to do with details rather than with the system as a whole. The diet was varied and attractive and certainly abundant. On the whole, the waste was larger than seems necessary, which would partially account for the fact that the cost of the diet was higher than would appear needful on theoretical grounds and higher than that of a similar diet in other institutions. * * * The studies made during the past year have given a tolerably clear idea of the existing conditions, and it is regarded as especially fortunate that during the present year it will be possible to make the attempt to improve them by applying the knowledge gained as the investigations at the Government Hospital are being continued with the cordial cooperation of Dr. W. A. White, the present head of the institution.

Most of the supplies of the institution are purchased after bids duly advertised for, under the direction of the Secretary of the Interior, and annual contracts are usually entered into. The Secretary of the Interior appoints a board to open bids, examine samples, and recommend awards. This board at present consists of the superintendent of the hospital as chairman; Mr. William B. Acker, the chief of the miscellaneous division of the Interior Department; Judge Parker, of the General Land Office; Mr. Rapp, of the Secretary's Office, and Mr. A. E. Offutt, who is the general purchasing agent for the hospital. Mr. Offutt was appointed by Doctor Richardson, the predecessor of the present superintendent, and has held the position continuously for six years. It is his duty to receive, a short time before the close of each fiscal year, from the heads of the various departments of the institution, such as the electrician, the engineer, the dry goods storekeeper, the grocery storekeeper, the pharmacist, and the farm steward, a list of the probable requirements for the ensuing fiscal year. These are properly classified and submitted to the Secretary of the Interior. Advertisements are inserted in the usual manner in some of the leading papers of the country, inviting bids for the items. Besides the articles that can be purchased in this way, the Secretary of the Interior permits the purchase of certain articles, mainly eggs, vegetables, fresh fish, fruits, and oleomargarine, in the open market.

In making the purchases above referred to, whether under the contracts made by the Secretary of the Interior with the several dealers or in purchasing goods in the open market, the purchasing agent is responsible.

The testimony that has been offered in regard to these food supplies shows that the food purchased is of a good quality and is obtained with proper consideration for the health of the inhabitants of the hospital, combined with the economical administration of the institution, although some testimony was introduced tending to show that at times the average in quality had not been what it should have been.

In the course of its examination the committee visited the kitchens of the institution, and believes that the food is of sufficient quantity and, notwithstanding the complaints that have been made as to improper preparation, is generally of good quality and fittingly prepared.

The committee believes that by the placing of steam tables in all of the dining rooms and building at least one if not two additional kitchens the facilities would be such that the preparation of the food and its prompt service might be improved, and would recommend that when specific improvements of this character are asked for by the superintendent of the hospital such recommendation be adopted and proper provision made.

Seventh. As to the buildings and farm.—There are the following departments in the hospital in connection with the care and treatment of patients:

The women's department, consisting of 11 buildings (oaks D and E being one building), with 646 patients and 83 employees, the number of patients in each building varying from 10 to 140, depending of course upon the size of the buildings.

The Howard Hall department, consisting of 5 buildings, with 354 patients and 45 employees.

The Richardson group department, consisting of 4 buildings, containing 371 patients and 43 employees.

The detached buildings department, consisting of 7 buildings (Allison D¹ and D² being one building), with 664 patients and 56 employees.

The receiving department, consisting of 2 buildings and having 447 patients and 74 employees.

The full list of these several departments and the buildings they contain, with the number of patients and employees in each of the wards, is set forth on page 520 in the testimony of Doctor Clark.

In addition to the buildings mentioned, the building or buildings designated as the east side, consisting of thirteen or fourteen wards, were unoccupied, and therefore omitted from the testimony. The committee has been informed, however, that the wards of the east side with a few exceptions are now occupied by patients, as are the buildings Dix 1 and Dix 2, also omitted from the testimony.

The buildings that have been most recently erected are in excellent condition, and are suitable for the purposes for which they were built. They were entirely completed just after the present superintendent assumed charge, appropriations having been granted by Congress and the buildings having been near completion at that time.

The land owned by the Government and occupied by the hospital

consists of a plot of about 350 acres, upon which all of the buildings above mentioned are situated, and besides this property there is owned the Stevens farm, of about 60 acres, which is only a short distance from the hospital, and also the Godding Croft farm, of approximately 450 acres, 5 miles distant. This farm is in charge of the superintendent, and employs about twenty hands, besides something like a dozen of the patients. These hands are paid from \$20 to \$32.50 per month. Fourteen horses and five mules are worked on the farm. The farm raises mostly truck vegetables and raises corn for silos. About 50 acres of the farm is in grass. All told, there are about 122 acres that are under present cultivation. The corn and garden truck are used by the hospital, and the rest of the farm is used for the pasture of the cows which are kept there, the milk from them being used in the hospital.

It does not seem to the committee that there is a sufficient utilization of the farm for the purposes of giving outdoor employment to the patients, but the committee entirely appreciates that this would be impossible with the present buildings now on the farm, as before more patients than are now used in the work on the farm could work there it would be necessary for an additional dormitory to be built, and the committee believes that this would be a useful adjunct to the general work of the institution.

The building established for the use of the female nurses is admirable.

It would unquestionably add greatly to the comfort of the male attendants and nurses if a similar building could be erected for their use, and the committee is informed that such a place is being established by the superintendent. There are other buildings on the hospital grounds used for the administration department, the engineer's department, barns, stables, etc.

Eighth. As to employment of patients.—Every witness who was questioned upon the subject, including the superintendent and the several members of the medical staff and all the superintendents from other institutions, said that it was an excellent thing for patients if they could be induced to work in any capacity. This is done in the Government Hospital for the Insane wherever it is feasible, and the patients generally are urged to work. It would not be possible nor even desirable to force patients to work, but no argument seems to be needed as to the beneficial results that ensue to the patients who have certain duties to perform. For this reason a considerable number of the patients are employed in or about the grounds and wards, in the barns, dining rooms, kitchens, laundry, sewing rooms, and on the farm. Altogether there are something like 600 patients so employed.

From the testimony of superintendents of other institutions this is not as large a proportion as are employed in some of the other institutions; but different conditions seem to exist here. In the first place, there are in the institution about 700 people over 60 years of age, and it would be, in the opinion of the physicians, impossible to get work out of those people. Besides that, something like 250 to 300 people are bedridden. And many of the old soldiers and sailors confined in the hospital are averse to doing menial labor, so that the committee believes that the best that is possible with the

material at hand is done to induce the patients to perform some labor. It, of course, should be remembered that the main object of asking the patients to work is for their own benefit and, incidentally, to decrease the expenses of the institution. The inability to secure a greater number of patients for this purpose is one of the reasons why the per capita cost is greater than in other institutions.

Ninth. As to so-called "bull pen."—In the course of the investigation mention was made of the inclosed group of buildings in the detached buildings department, which was designated as the "bull pen." As a matter of fact, the so-called "bull pen" consists of an inclosure of something over 7 acres of land, the grounds of which are improved, having in the inclosure trees and seats under them for the use of the patients. The so-called "bull pen" in fact is a small park inclosed to allow the patients confined therein to have greater liberty in outdoor exercise.

The testimony in regard to this particular inclosure was given by Dr. J. T. Simpson, and appears on page 1497 of the record. He said that was a little park that he made himself; that with the help of some of the patients and employees he laid it out, graveled the walks, planted trees and shrubs, put out plants, and tried to beautify it as much as possible. It was entirely detached from the rest of the grounds. The patients were more or less confined to these limits, because the patients that were under his control were largely old men who would wander away. In that way the patients were, as a rule, not allowed a parole of the entire hospital grounds. They were confined within this space, and an ordinary parole meant inside of that inclosure. This was in the case where a greater confinement was necessary than with the men who were especially trustworthy and were allowed the privilege of going outside of the inclosure and going down by the river and around into other portions of the grounds. The buildings take up a good deal of the ground. There is a group of buildings, the Allison group, and although they take considerable space there is a fair amount of recreation ground left. There are some summerhouses there, and on a small scale it is laid out like a park.

Doctor Hummer testified as to the so-called "bull pen" and said that certain of the patients there are taken outside and through the entire hospital grounds in charge of attendants every day.

Tenth. As to the dual management.—Some testimony was taken in regard to the propriety of institutions similar to that of the Government Hospital for the Insane having a dual head, one for the medical care of the institution and the other for the care of the purchase of supplies and the management of buildings, etc. The committee is confident that this plan is one that is not feasible. The superintendent of one of the institutions testified that the mere question of food supplies should be under the immediate control of the medical superintendent, and stated that nothing was more important in the care of persons either mentally or physically ill than the question of their diet.

The overwhelming preponderance of the evidence is in favor of the single and not the dual management of such institutions.

Eleventh. As to classification of patients.—Since Doctor White has been superintendent the question of the proper segregation of patients has been carried to as great an extent as seems to be possible

with the present buildings, and is being continued as rapidly as practicable. Epileptic patients have been separated from others as far as is possible; the tubercular patients have been entirely separated from other patients; paretics have been accumulated in separate wards.

It must be borne in mind that in this particular institution there are 500 criminal insane. They are confined in one building, commonly known as Howard Hall. The committee believes that it would be of very great advantage to the institution for Congress to provide for the founding of a hospital for the criminal insane, so that that class of patients could be taken entirely away from the hospital.

Twelfth. As to pensions.—The testimony shows that a number of old soldiers at the hospital are drawing pensions, and some criticism has been made as to the method of collecting and disbursing the same. Section 8417 of the Revised Statutes provides that inmates of the National Homes for Disabled Volunteer Soldiers who may become insane shall, upon an order of the president of the Board of Managers thereof, be admitted to the Government Hospital for the Insane. This law made it mandatory upon the superintendent of the hospital to receive this class of patients, many of whom were at the time of their admission in receipt of a pension. Such pension money was, up to February 20, 1905, paid directly to the wife or dependent relatives of the soldier, or to the soldier himself if he had no wife or dependent relatives, provided he was mentally competent to sign the pension voucher, in which case the superintendent certified that fact to the Pension Bureau. In the event that the pensioner did not have dependent relatives and was not competent to sign the voucher, the pension money remained in the hands of the Pension Bureau until a guardian was appointed by the court, when the money was paid over to such guardian.

The act of August 7, 1882, however, provided that such pension moneys, in cases where the inmate had neither wife nor dependent relatives, should be made payable to the superintendent of the hospital for the general purposes of the hospital, and the pensioner derived no special benefit therefrom.

Notwithstanding the act of 1882 last above referred to, and for some time after the passage thereof and before the incumbency of Doctor White, many of the inmates who had no wives or dependent relatives, and were able to sign the pension vouchers as before stated, received their pensions, but at some subsequent period not disclosed by the testimony all of these moneys were paid over to the superintendent for the purposes of the hospital, in accordance with the provisions of that act.

When Doctor White became superintendent he found some \$30,000, which had accumulated under the provisions of the act of 1882, and, at the request of the Commissioner of Pensions, the same was turned over to him by said Commissioner and he in turn deposited such sum in the Treasury; but up to the present time no use whatever has been made of this money.

In some of these cases it was found that the soldiers at the time of their admission to the hospital were not in receipt of pensions, although they were properly entitled thereto. In those cases it was necessary, under the law, for a guardian or committee of the patient to be appointed by the court, in order that proper application for

pension could be made to the Pension Bureau; but, as the patient was received upon the order of the president of the Board of Managers of one of the National Homes for Disabled Volunteer Soldiers, it was further necessary to have such patient judicially declared insane by the court prior to the appointment of his committee and the subsequent application to the Pension Bureau for a pension.

Committees were appointed in certain cases, and where pensions were subsequently granted by the Pension Bureau the same were collected, and in every case, upon order of the court, disbursed by such committees.

Congress passed another act on February 20, 1905 (which is printed in full at page 1743 of the record). This act provides, among other things, that the pensions of all inmates of the hospital shall be paid to the superintendent, to be disbursed by him under regulations to be prescribed by the Secretary of the Interior, and such regulations have been accordingly made by the Secretary of the Interior and will be found at page 1744. These regulations direct the superintendent to receive the pension of the inmate as agent and use the same, first, for the benefit of the pensioner; second, for the benefit of relatives entitled under the law, and third, to reimburse the hospital for the pensioner's board and maintenance. The superintendent is also directed by the regulations to reserve from each pension an amount, not to exceed one-sixth thereof, to be expended in the purchase of such articles as may be required for the pensioner's welfare and which are not provided from the regular hospital funds or otherwise for the pensioner's benefit, and to charge the remainder, after payment therefrom for the benefit of relatives, if any, as provided in such regulations, with the pensioner's board and maintenance in the hospital, and to place any balance then remaining to the pensioner's credit on the books of the hospital; to pay any unexpended balance of pension money reserved for the pensioner's benefit and any pension money to his credit on the books of the hospital, in the event of the pensioner's discharge from the hospital, to the pensioner, or to his lawful guardian, or, in the event that the pensioner is returned to a Branch of the National Home for Disabled Volunteer Soldiers, to the treasurer of such Branch. In the event of the pensioner's death while an inmate of the hospital the superintendent is directed to pay the same to his widow, or, if there be no widow, to his minor children, or, if there be no widow or minor children entitled to payment of such balance of pension money, to apply the same to the general uses of the hospital.

From the evidence given on this subject it appears that in no case is there deducted from the pension money of an inmate a greater amount than \$220 per annum for board and maintenance, which sum is the per capita cost appropriated by Congress.

It is also important here to say that, since the passage of the act of February 20, 1905, there is no necessity for the appointment of committees, except in a case where the inmate is entitled to certain arrears of pension, and in that case the law provides for the appointment of a committee to collect such arrears; but after the appointment of the committee and the receipt by him of such arrears the pension money must be turned over to the superintendent, as agent, to be used by him as hereinbefore stated.

While it would seem to the committee that the act of 1882, pro-

viding for the payment of pensions to the superintendent for the purposes of the hospital, was not reasonable or fair to the patient, it does not deem it within the scope of its duties to criticise the law.

But it is the opinion of the committee that the act of February 20, 1905, which, presumably, was passed to cure whatever of injustice existed under the act of 1882, is a reasonable solution of the question.

The pensioner now receives one-sixth of his pension money for the purpose of providing himself with such necessities as the hospital is not able to give him; a certain portion is paid to dependent or non-dependent relatives; a certain portion, not to exceed \$220 per year, is used for his board and maintenance at the hospital, and the balance placed to his credit, or, if he has no dependent or nondependent relatives, after the deduction of the amount of his board the entire amount of such balance is placed to his credit, and upon his discharge is paid over to him or his guardian. If the pensioner dies while an inmate of the hospital the amount standing to his credit is turned over to his widow or minor children, and, if there be no widow or minor children, to the hospital.

The committee believes that such disposition of pension money is fair, and that there is no necessity for recommending any changes in the law.

Thirteenth. Per capita cost.—In the course of the investigation there was more or less testimony taken from the officials connected with the Government Hospital for the Insane, the superintendents of other similar institutions, and others as to the question of per capita cost, and it would appear from the schedules filed that such cost per capita in the Government Hospital was greater than that in similar institutions in various States. This is not universally so, as will be seen by the testimony of the superintendent on page 920, where it appears that three institutions which he mentions cost more per capita than the Government Hospital. It should be said in this connection that the per capita cost of the Government Hospital for the Insane for the last twenty years has been at least \$220 a year. During a short period of those twenty years the per capita cost was \$225, as shown by the appropriations made by Congress for the institution.

Previous to the appointment of Doctor White as superintendent it was frequently necessary to make an appropriation in the general deficiency bill for deficiency in the maintenance of the hospital. This has not been the case since Doctor White's appointment, notwithstanding 15 additional buildings have since been opened, occupied, and maintained. As a matter of fact, at this time there are 18 more wards in commission than before he took charge of the institution. It is true that the number of people employed has been practically unchanged, but many of the salaries of the attendants and the other employees of the hospital have been raised.

Entirely apart from these facts, the population of the Government Hospital for the Insane is unique, and the character of the patients makes it practically impossible to make an accurate comparison with institutions for the care of the insane elsewhere. In the first place, something like 700 of the patients in the institution are more than 60 years of age; more than 250 of the patients are bedridden.

The men who have served in the military establishment of the country are usually unwilling to perform any voluntary labor.

Generally speaking, they believe that they are entitled to a life of entire ease and freedom from work, as they would be were they in entire possession of their mental faculties and inmates of a Soldiers' Home. Then, too, the white people who go to the institution from the District of Columbia are averse to performing anything in the nature of manual labor, as they are inclined to think that such labor should be performed by the colored inhabitants of the institution. On the other hand, the colored inhabitants of the institution are averse to performing labor because they feel that all labor is entitled to pay.

The authorities of the Government Hospital for the Insane endeavor to get the inmates of the institution to perform work, just as the superintendents of other institutions do, and labor with as much patience and earnestness as do the heads of other hospitals; but the fact remains that whereas in the Central Islip Hospital, in the State of New York, the Central Hospital for the Colored Insane of Virginia, and the Massillon State Hospital of Ohio, between 75 and 80 per cent of patients are employed, the Government Hospital is not able to procure the services of more than 25 per cent.

Another reason why it is impossible for the Government Hospital to get as much work out of patients as in the case of these just mentioned: These institutions all have much more land immediately surrounding the buildings, and at the very doors of the dormitories farms of considerable proportions are maintained. This condition of affairs does not exist in the Government Hospital, and the circumstances prevent the cultivation of any but a small portion of its farm. The condition of the patients confined in the hospital, as specifically detailed above, makes it impossible to get a materially greater number of patients to perform work than is done by the present superintendent of the hospital.

In the opinion of the committee it would be advantageous to the institution and beneficial to the patients if additional lands could be obtained.

Fourteenth. As to the creation of a lunacy commission.—The evidence shows that there exists in many States a lunacy commission, whose duty it is, among other things, to make inspection of the various hospitals for the insane under its supervision.

The committee is of the opinion that, in case there were several Government hospitals for the insane, it would be the part of wisdom for Congress to make legislation for the creation of a lunacy commission so that these several institutions could be conducted along the same lines, but in the case of the Government Hospital for the Insane there would seem to be no need for such a commission.

The board of visitors, whose duties are prescribed by statute, so far as the question of inspection is concerned, performs the work of a lunacy commission, and the committee believes that that was the object of the statute. The superintendent is, of course, under the control of the Secretary of the Interior.

The statute provides that the board of visitors, subject to the approval of the Secretary of the Interior,

may make any needful by-laws for the government of themselves, and of the superintendent and his employees, and of the patients, not inconsistent with law; they shall visit the hospital at stated periods, and exercise so careful a supervision over its expenditures and general operations that the Government and community may have confidence in the correctness of its management, etc.

The committee can not conceive that anything would be gained by the appointment of a lunacy commission, but, on the other hand, there would be incurred, in case of such appointment, the expenses incident thereto.

There was testimony from one of the witnesses that there should be a lunacy commission created for the hospital, but the witness stated that the reason for his opinion was that other institutions for the insane might hereafter be created in the District which could be placed under the supervision of this commission, if appointed.

The superintendents of the various State institutions for the insane who were examined on this point stated that although there was great necessity for a lunacy commission in their respective States they could see no reason for establishing such a commission for the purpose of supervising control over one particular institution.

Fifteenth. As to the commitment of patients.—A great deal of time has been given to the question of the authority for and method of commitment of indigent patients from the District of Columbia to the hospital, and after a careful examination of the law in connection therewith the committee has no hesitancy in saying that the law as it now stands on that subject is misleading, conflicting, and ambiguous.

In addition to the Revised Statutes hereinbefore referred to, at page 1786 of the record and following, the committee found that the deficiency appropriation act of June 30, 1903, provided that—

hereafter proceedings by the Commissioners of the District to commit indigent insane persons and insane persons with homicidal or dangerous tendencies shall be in the equity court of the said District and shall be in conformity with the law in force in the said District on the thirtieth day of January, eighteen hundred and ninety-nine.

It also found another act, passed February 23, 1905, which was not included in the printed copy of the Revised Statutes filed as an exhibit.

Also, in the Code of Laws for the District of Columbia, amended to and including March 3, 1905, the committee found a provision, section 115a, in connection with lunacy proceedings, as follows:

SEC. 115a. *Lunacy proceedings.*—All writs de lunatico inquirendo shall issue from said equity court, and the justice holding said court shall preside at all inquisitions of lunacy, and, when necessary, may use a jury from either the circuit or criminal court, or may cause a special jury to be summoned for such inquisitions.

The committee also found a decision on the subject made by the supreme court of the District of Columbia February 16, 1885, and hereinafter more specifically set forth in the matter of William M. Bryant (3d Mackey's Repts., 489).

A considerable amount of testimony was heard as to the method of the commitment of inmates of the Soldiers' Homes to the Government Hospital for the Insane as provided by statute—that is to say, upon the written order of the president of the Board of Managers of said Homes to the superintendent of the hospital. The form of such order will be found contained in the record at page 1205.

Objections were made by several of the witnesses to this method of commitment from the Home on the ground that great injustice might be done to some of the old soldiers, and, in fact, they alleged that, in certain cases, inmates from the Homes had been sent to the hospital, upon the order as aforesaid, who were in fact sane.

As to the legality of this method of commitment there can be no doubt, in view of the decision in the case of Bryant, before mentioned. By that decision the court held that these commitments were proper; that persons in the Army or Navy or Marine Corps, or, perhaps, even in the Revenue-Cutter Service, were already under control; and that—

a soldier can be made to go into the hospital for medical treatment, upon the judgment of his superior officers, and they can order him to this asylum if they think that he ought to go there, and in that case the officer's action would be due process of law.

The committee also heard some testimony to the effect that the courts had decided that this manner of commitment was illegal in all cases where the term of enlistment of the soldier had expired. In other words, that, as soon as the term of enlistment of such an inmate expired, his status was the same as that of a person who was not under control of the Secretary of War, or the Secretary of the Navy, and that his commitment should be by "due process of law," or inquisition by court and jury.

The following appears in the report of the Secretary of the Interior for the fiscal year ending June 30, 1905:

During the year a number of writs of habeas corpus were sued out in the local courts for the release of persons confined in the hospital, and, under instructions from the Attorney-General the United States attorney for the District of Columbia defended these suits on behalf of the hospital. As a general result of these proceedings it has been held that persons in the service of the United States Army or Navy may lawfully be committed to the Government Hospital for the Insane under the statutes providing for their care and treatment in said institution upon the order of the Secretary of War or of the Navy, respectively. Upon the expiration of the term of enlistment of any such patient, however, whether from the Army or Navy, they are held to resume their status as private citizens and to be beyond the control of the Secretary of War or of the Navy, as the case may be; hence the hospital can not legally detain them after such time unless they shall be duly committed thereto by "due process of law," which in the present case means an inquisition before a jury into a patient's mental condition.

It has also been held that the transfer of an inmate of the National Home for Disabled Volunteer Soldiers to the Government Hospital for the Insane upon the order of the Board of Managers of said Home did not constitute due process of law, and was therefore illegal. An appeal has been taken by the district attorney from the foregoing decisions, and the cases are still pending.

As to the alleged injustice or impropriety of such commitments, the committee begs to call attention to the fact that the superintendent of the hospital is directed to receive these patients "until cured." In other words, it is mandatory upon the superintendent to return these patients when cured to their respective Soldiers' Homes. The testimony also shows that this has been done in many cases, and the committee is of the opinion that there is no desire on the part of the superintendent to retain these patients in the hospital after they are cured. Indeed, the testimony shows that, in certain cases where criminals alleged to be insane have been sent to the hospital from Federal and military prisons and were found by the physicians to be feigning insanity in order to escape the hardships of such prisons, they were sent back by the superintendent.

As an illustration, Dr. L. H. Taylor, formerly a medical interne at the Government Hospital for the Insane, testified:

I can refer you to a case that happened. There was a prisoner over there named Bromley, I think, who had committed some offense in the Philippines or one of the tropical possessions. He had murdered somebody and he was

sent to Fort Leavenworth as a life-sentence man, if I am not mistaken. * * * We all knew he was a malingerer there, and finally we sent him back to Leavenworth. He was very glad to go back, because he thought he was going to get a pardon. He had not been there more than three or four days, however, before he was the most violent insane man ever known. When I left St. Elizabeth's there had been a lot of correspondence between the superintendent and the proper military officials in regard to him. I know that I saw correspondence from the superintendent calling the attention of the proper authorities to the fact that he considered the man was a malingerer, and that it would be advisable to have some alienist examine him. The last I heard of it the man was still at Fort Leavenworth. * * * I was instrumental in calling the attention of the superintendent to it and in bringing about the correspondence in regard to the matter.

There is no sound reason in the contention of some of the witnesses that the patients thus received from the Homes, or anywhere else, are improperly detained at the hospital.

To revert to the question as to the manner of commitment of indigent patients from the District of Columbia, it might be well, perhaps, to dilate upon the methods now in practice, and the law relating thereto, from the beginning of the hospital up to the present time.

Prior to February 16, 1885, commitments were usually made by the Secretary of the Interior upon the statements of two physicians and a relative or friend of the alleged lunatic, presumably in accordance with the statutes at that time in force, until one Bryant, a patient at the hospital, sued out a writ of habeas corpus, demanding his release upon the ground that he was committed without due process of law.

On the date last above mentioned the supreme court of the District of Columbia decided in that case that Bryant was committed without due process of law, and it therefore ordered his discharge from the hospital, declaring, among other things, that the whole question of commitment was regulated by the Maryland statute of 1785, chapter 27, section 6, providing that the insanity of a person should in all cases be established by an inquiry through a jury; that the sections of the Revised Statutes as they then existed did not contemplate compulsory seclusion in the hospital without due process of law, and that if they meant anything else they would be unconstitutional.

Thereafter all proceedings in lunacy were had before a marshal's jury, in accordance with the Bryant decision and the law of Maryland, until January 31, 1899, when Congress passed an act (now section 8425 of the Revised Statutes as amended) doing away with the necessity of the marshal's jury and directing the proceedings to be brought before one of the justices of the supreme court of the District.

This law of 1899, it would seem, remained in effect until June 30, 1903, when Congress made a provision in the deficiency appropriation act, that—

proceedings * * * to commit indigent insane persons * * * shall be in the equity court of the said District and shall be in conformity with the law in force * * * on the 30th day of January, 1899.

In other words, Congress directed that such commitments should be made only after an inquiry by a marshal's jury.

In 1901 a provision was inserted in the Code of Laws for the District of Columbia, sections 115a, etc., that such cases should be heard before a justice of the equity court—

who shall, when necessary, use a jury from either the circuit or criminal court, or may cause a special jury to be summoned for such inquisitions.

Chapter LX of the said code, however, containing the repeal provisions, in paragraph 8 thereof specifically excepts from the acts repealed thereby "all acts or parts of acts relating to * * * the commitment of the insane in the District of Columbia," etc., which, of course, meant the retention of the method of hearings before a marshal's jury. Further than that, section 8435 of the Revised Statutes specifically provides for such marshal's jury in these cases, so that it would seem that the code makes one provision for a trial before the court which had power to call a special jury and another for a trial by marshal's jury.

Congress again passed another act on April 27, 1904 (secs. 8436, 8437, 8438, 8439), authorizing any member of the Metropolitan police of the District to apprehend and detain without warrant any insane person found on any street, avenue, etc., and directing such officer to make affidavit as to the sanity of the person so apprehended, and that notification should be given to the relatives of the insane person, provided his address could be found.

This act also authorizes the major and superintendent of the Metropolitan police to order the apprehension and detention without warrant of any indigent person alleged to be insane found elsewhere in the District than on the street, avenue, etc., as aforesaid—

whenever two or more responsible residents of the District of Columbia shall make and file an affidavit with said major and superintendent * * * setting forth that they believe the person therein named to be insane or of unsound mind, the length of time they have known such person * * *: *Provided, however,* That before the major * * * shall order the apprehension and detention of any person upon the affidavits of the aforesaid residents, or in case of arrest, as provided in the section last preceding [on the streets, etc.], he shall, in addition thereto, require the certificate of at least two physicians, who shall certify that they have examined the person alleged to be insane, etc.

It further states that the Commissioners of the District of Columbia are authorized to place in the hospital, and the superintendent is authorized to receive upon the written request of the said Commissioners, for a period of time not exceeding thirty days, indigent persons alleged to be insane or of unsound mind, residents of, or found within the District of Columbia, and alleged insane persons of homicidal or otherwise dangerous tendencies so apprehended and detained, as hereinbefore provided, pending the formal commitment of such persons to said hospital, as provided by law, and that any such alleged insane person may be detained in any police station or house of detention in said District pending the completion of arrangements for his temporary detention in the hospital. It also provides that if, pending the formal commitment of such alleged insane person, the superintendent of such hospital, in the case of the commitment of a person to said hospital, or if two or more physicians in regular attendance at any other hospital or asylum where any person is committed under the provisions of the act, or if two or more surgeons of the police and fire departments, in the case of any person detained at any police station or house of detention as aforesaid, shall certify in writing to the Commissioners of the District that such person is not insane or that he has recovered his reason, the official in charge of the hospital, or the major and superintendent of police, if such person be confined in a police station house or in a house of detention, shall discharge such alleged insane person or persons of unsound mind forthwith and immediately report such action to the Commissioners of the District.

The act then provides for the character of the affidavits of physicians and the penalty for making false affidavits, etc.

The law of April 27, 1904, aforesaid repeals all acts and parts of acts inconsistent with the provisions thereof.

Again, and on February 23, 1905, Congress passed another act which provides that thereafter the proceedings to determine the mental condition of alleged indigent insane persons shall be according to the provisions of the Code of Law for the District of Columbia relating to lunacy proceedings, provided that the jury to be used shall be impaneled by the United States marshal for said District, upon order of the court, from the jurors in attendance upon the criminal courts of said District—

who shall perform such services in addition to and as part of their duties in said criminal courts: *Provided further*, That during such time as jurors are not in attendance upon said criminal courts the court may direct the said marshal to impanel the jurors in attendance upon the police court * * * or the said court may direct a special jury to be summoned for such inquisitions.

The act also provides for the appointment of a committee in case the person is declared insane and has property, and that, in case the person adjudged insane shall thereafter be discharged as cured, the superintendent of the hospital shall immediately thereafter file with the clerk of the supreme court of the District his sworn statement that such person, in his opinion, was at the time of his discharge of sound mind, and that such statement shall be sufficient to authorize the court to pass an order declaring such person to be restored to his or her former legal status as a person of sound mind.

It is apparent from a careful reading of the Revised Statutes and the law relative to the procedure in cases of commitment that such commitment is permitted in various ways, except that it is absolutely necessary for all commitments of civilians to be made by due process of law or inquiry by a jury.

The practice in proceedings for commitment of indigent patients to the hospital, as now followed by the Commissioners of the District, is as follows:

Application by relatives or friends.—Affidavit is made by two residents of the District, usually relatives of the alleged insane person, alleging the insanity of the person; that they believe him to be of unsound mind, incapable of managing his affairs, and a fit subject for detention and treatment at the Government Hospital for the Insane; the length of time he has been in such condition; that he is not fit to be at large; that if he be permitted to remain at liberty in said District the rights of persons and of property therein will be jeopardized, the preservation of the public peace imperiled, and the commission of crime rendered probable; that they believe that he is not the possessor of any lands and tenements, and that he is indigent and unable to pay for his care and treatment at said hospital.

This affidavit is made upon a blank furnished by and filed with the sanitary officer in the Metropolitan Police Department, and a copy of the form thereof is annexed hereto and marked "A."

Another affidavit is furnished by and filed with said officer, made by two physicians, stating that they, being qualified to make the affidavit as provided by law, certify that they have made an examination of the mental condition of the person said to be of unsound mind, and that in their judgment the said person is of unsound mind

and should not be allowed to remain at liberty unrestrained, and that said person is a fit subject for treatment on account of his mental condition. A copy of the form of such affidavit is annexed hereto and marked "B."

A certificate furnished by said officer is then made out by the said physicians, stating that they, after a personal examination of the said person, find him to be insane, which certificate gives the history of the case as far as the physicians have been able to obtain the same. Such certificate is filed with said officer, who thereafter files the same with the superintendent of the Government Hospital for the Insane at the time of the admission of the said insane person to the hospital. The person so found to be of unsound mind is brought to the hospital either by his relatives or friends or by the superintendent of the Metropolitan police or one of the officers thereof. A copy of the form of said certificate is annexed hereto and marked "C."

The papers above mentioned, to wit, A, B, and C, are then handed to the Commissioners of the District, and the said Commissioners then prepare a form of temporary commitment addressed to the superintendent of the hospital, requesting the said superintendent to admit the person declared to be of unsound mind, pending a formal investigation of his mental condition according to law. A copy of such form of temporary commitment is hereto annexed and marked "D."

Within thirty days after such temporary commitment the person so committed is brought before the supreme court of the District and a jury, upon the petition of the Commissioners accompanied by the papers aforesaid (the said Commissioners being represented by the corporation counsel), and the question as to the sanity or insanity of the said person decided.

If the said person be declared insane by said court and jury the Commissioners of the District, being informed thereof, fill out another form (the permanent commitment), stating that the records of the supreme court show that a jury, lawfully impaneled and presided over by one of the justices of said court, according to law, has declared the said person to be of unsound mind and a fit subject for detention and treatment, and that a verdict of said jury has been duly confirmed by said court, and requesting and directing the superintendent of the Government Hospital for the Insane to admit the said person to the benefits and privileges of the Government Hospital for the Insane, in conformity with the statute in such case made and provided. A copy of such form of commitment is annexed hereto and marked "E."

In cases of commitment of persons who are not indigent the same method is pursued and the same forms used, except that such forms state that the said person is a "pay patient."

There is also another form of permit used, a copy whereof is hereto annexed and marked "F," which is signed by the Commissioners of the District, who request the superintendent to receive a patient formerly discharged from the hospital as "improved," but who has again manifested mental unsoundness with dangerous tendencies. This permit states the fact of the former commitment of the patient and his discharge from the institution as improved, and that if he

be allowed to remain at liberty the public peace will be imperiled and the commission of crime rendered probable, etc. In these cases the blacks A, B, and C are again used, but the patient is not brought into court, in view of the fact that he was not discharged as "cured" and was still on the court dockets as an insane person.

Arrest of insane persons.—This report has already set forth the act of 1904, granting authority to the major and superintendent or any member of the Metropolitan police of the District to apprehend and detain, without warrant, any insane person or persons of unsound mind "found on any street, avenue, alley, or other public highway, or found in any public building or other public place within the District of Columbia."

The officer making the arrest is required to make an affidavit, the form of which is also provided by and filed with the sanitary officer aforesaid, a copy whereof is hereto annexed and marked "G." Such form of affidavit states that, from what the officer knows and has seen of such person, he believes him to be of unsound mind, incapable of taking care of himself or his property, and that if permitted to remain at large or go unrestrained in the District the rights of persons and property will be jeopardized or the preservation of public peace imperiled and the commission of crime rendered probable.

In addition to this affidavit the affidavit and certificate of two physicians must be made and filed, and the forms B and C aforesaid are used for that purpose, and the same method of temporary commitment and subsequent proceedings for permanent commitment or discharge of the alleged insane person is followed as in the case where application is made by a friend or relative.

The Commissioners of the District, after the temporary commitment, employ a physician to visit the patient and examine his mental condition, and this physician gives testimony in court at the time of the trial.

Dr. Presley C. Hunt, a witness called before the committee, for some time has been making such examinations, and the committee quotes from his testimony at page 623 of the record as follows:

Before the case comes to trial, which under the law has to be within thirty days, I examine that case, generally a day or two days after the trial comes on. I am allowed to look over the first examination paper made by the different surgeons, and then I examine the man myself to find out his mental condition, and I testify in court to such condition after the police surgeons have testified. If in my opinion the case has sufficiently recovered to be discharged, the jury, as a rule, takes my opinion and discharges the patient. Last week, for instance, there were two cases that were certified * * * that were discharged by order of the court on my testimony.

The Commissioners of the District, therefore, are the only authority for committing civilians to the hospital, and the committee is unable to see just what might happen if the said Commissioners refused to commit a person, especially after a trial before the court and jury as aforesaid.

There is not before the committee evidence of any injustice having been done to anybody by reason of this method of commitment, but it believes that the methods thus stated, even if they be considered the only proper construction of the statutes, are unduly cumbersome, and that the procedure in these lunacy cases might be improved with beneficial results to all concerned.

The whole law as to the question of commitment of patients and the method of procedure in connection therewith should be changed, and a statute should be enacted in lieu thereof which would be clear and explicit, defining the lunacy proceedings in as simple a manner as possible.

It might properly be argued that the power given to the Commissioners of the District to commit patients after the findings of the jury and the order of the court thereon is superfluous, and there might also be a fair objection to the method of having a jury trial to inquire into the sanity or insanity of the person temporarily committed in every case.

For instance, in the case of a jury trial, where the jury finds that the person before it is insane the order of the judge presiding at such trial, upon such finding, might be sufficient for all purposes, and the patient committed upon such judge's order, thereby doing away with the necessity for a commitment by the Commissioners.

And as to the objection to the jury trial in every case before commitment, it could be said that in some cases great hardship would ensue, both to the patient and his relatives. There is no doubt that in many cases the patient is undoubtedly and perhaps dangerously insane and the publicity attending these trials humiliating to a degree.

And again it might be said with propriety that the whole question of insanity is purely and absolutely a medical one, and that it would be eminently proper to have the question decided by medical men rather than by a jury of laymen.

In many of the States of the Union the method of commitment is more simple than in the District of Columbia, and there is no necessity or provision for jury trials in every case nor for the cumbersome methods here practiced.

In the event of the enactment of a new lunacy law for the District of Columbia which would eliminate the necessity of a jury trial, as before mentioned, a provision could be made therein giving the patient, or his relatives or friends, the right to demand a jury trial before commitment, after notice given to him that application is to be made for his commitment. Provided the patient has no friend or relative the power to request a jury trial might be given to some official of the District; for example, the board of charities.

It is the opinion of the committee that there is urgent necessity for a change in the lunacy law, and it therefore recommends that a new statute be enacted in place of what it considers the vague and conflicting law on that subject at the present time.

The committee submits herewith the following conclusions and recommendations:

CONCLUSIONS.

- (1) That Dr. William A. White is fully qualified to perform the duties of the position of superintendent.
- (2) That the charges of mismanagement of the hospital and of abuse of patients have not been sustained by the evidence.
- (3) That the physicians on the medical staff and consulting staff of the hospital are capable men and able to properly care for the needs of the patients.

(4) That the methods of restraint now used at the hospital are proper, and that restraint is only resorted to in cases of actual necessity.

(5) That the attendants perform their work well and care for the patients in a proper manner; that there have been cases of harsh treatment on the part of some attendants, which, however, have invariably resulted in the summary dismissal of the guilty parties.

(6) That the dietary used at the hospital is of good quality, of proper variety, and the food is generally well prepared and cooked.

(7) That the hospital is a modern institution and is abreast of the times, and is making proper progress in the scientific work with which it has to do; that the buildings and equipment are equal and in many cases superior to those at other institutions.

(8) That the patients are employed in and about the hospital as far as practicable, and that such employment of patients adds materially to their welfare.

(9) That the so-called "bull pen" is a misnomer, and the group of buildings and inclosure so termed is properly arranged for the comfort of the patients.

(10) That the management of the hospital should be under one head.

(11) That the superintendent has made a careful classification of the patients as far as practicable.

(12) That the law now existing relative to the collection and disbursement of pension money of patients, together with the regulations of the Secretary of the Interior in connection therewith, are just and equitable.

(13) That the per capita cost of the hospital as now fixed should not be reduced, in view of the peculiar conditions surrounding the hospital, which do not exist at other similar institutions.

(14) That there is no necessity for the creation of a lunacy commission in the District of Columbia.

(15) That the law relative to the commitment of patients should be repealed and a new law enacted.

RECOMMENDATIONS.

In view of the fact that the superintendent of the Government Hospital for the Insane is authorized by statute to make such improvements as he may deem necessary out of the money appropriated for the support fund of the hospital and the pension money now in his hands not to the credit of the patients, and it appearing that he has been and is now engaged in making various improvements which have and will inure to the benefit of the patients, the committee can not see any reason for making recommendations except as follows:

(1) That the statute should be amended so that the superintendent should be relieved of performing the duties of a disbursing officer of the hospital and should be given authority to appoint a disbursing officer to act under his direction.

(2) That the statutes should be amended so as to make provision for the creation of a separate institution in the District of Columbia to care for the criminal insane patients now confined in the hospital.

(3) That steam heaters to be used for the purpose of keeping the

food hot after it leaves the kitchens should be installed in each dining room in the hospital.

(4) That at least one and perhaps two new kitchens should be installed wherever it or they would be most convenient for the preparation of food served to patients and attendants.

(5) That the statutes relative to the commitment of patients should be repealed and a new lunacy law enacted.

(6) That the farm could be utilized to a greater advantage to the institution if additional dormitory facilities could be provided there.

Respectfully submitted.

J. VAN VECHTEN OLCOTT.

M. L. SMYSER.

A. J. BARCHFELD.

FEBRUARY 15, 1907.

A.

HEADQUARTERS METROPOLITAN POLICE DEPARTMENT.

SANITARY OFFICE.

Affidavit of lunacy.

WASHINGTON, D. C., ———, 190—.

We, the undersigned residents of the District of Columbia, do certify, under oath, that we have known ——— for ——— years and ——— years, respectively, and we believe ——— has been a resident of the District of Columbia for the past ——— years, and from what we know and have seen of ——— we believe ——— to be a person of unsound mind, incapable of managing ——— own affairs, and a fit subject for detention and treatment at the Government Hospital for the Insane in said District; that ——— has been in such condition to the best of our knowledge and belief since the ——— day of ———, 190—; that in ——— present condition ——— is not fit to be at large, and if ——— be permitted to remain at liberty in said District the rights of persons and of property therein will be jeopardized, the preservation of the public peace imperiled, and the commission of crime rendered probable, and we believe, from information received, that ——— is not the possessor of any lands and tenements; and we further believe ——— to be indigent and unable to pay for ——— care and treatment at said Government Hospital for the Insane.

Residence, ———.

Residence, ———.

Subscribed and sworn to before me this ——— day of ———, 190—.

Notary Public, District of Columbia.

B.

HEADQUARTERS METROPOLITAN POLICE DEPARTMENT.

SANITARY OFFICE.

Certificate of lunacy.

WASHINGTON, D. C., ———, 190—.

We, the undersigned physicians, having the qualification to make this certificate prescribed by section 5 of the act of Congress approved April 27, 1904, entitled "An act to authorize the apprehension and detention of insane persons in the District of Columbia, and providing for their temporary commitment in

the Government Hospital for the Insane, and for other purposes,"* hereby certify that we have made an examination of the mental condition of the above-named _____, and in our judgment said _____ is of unsound mind, and should not be allowed to remain at liberty and go unrestrained, and that said person is a fit subject for treatment on account of _____ mental condition.

_____, M. D.
Residence, _____.

_____, M. D.
Residence, _____.

QUALIFICATIONS FOR PHYSICIANS.

*SEC. 5. That for the purposes of this act no certificate as to the sanity or the insanity of any person shall be valid which has been issued (a) by a physician who has not been regularly licensed to practice medicine in the District of Columbia, unless he be a commissioned surgeon of the United States Army, Navy, or Public Health and Marine-Hospital Service; or (b) by a physician who is not a permanent resident of the District of Columbia; or (c) by a physician who has not been actively engaged in the practise of his profession for at least three years; or (d) by a physician who is related by blood or by marriage to the person whose mental condition is in question. Nor shall any certificate alleging the insanity of any person be valid which has been issued by a physician who is financially interested in the hospital or asylum in which the alleged insane person is to be confined, or who is professionally or officially connected therewith.

SEC. 6. * * * Any physician who knowingly makes any false certificate as to the sanity or insanity of any other person shall, upon conviction thereof, be fined not more than \$500 or imprisoned not more than three years, or both.

C.

DEPARTMENT OF THE INTERIOR. GOVERNMENT HOSPITAL FOR THE INSANE.

Medical certificate.

We certify that after a personal examination of the within-named person we find _____ to be insane. The following is a history of the case as far as we have been able to obtain it:

Name, _____; age, _____; sex, _____. Married, single, widowed, _____; nativity, _____; education, _____; occupation, _____; religion, _____; post-office address of friends, _____; telegraph address, _____.

What relatives, including grand parents and cousins, have suffered from either of the following diseases: Insanity, epilepsy, chorea, hysteria, neurasthenia, tuberculosis? _____.

Were parents addicted to excessive use of alcohol, opium, chloral, or other narcotics? _____.

Habits of patient as to same, _____.

Previous peculiarity of patient as to temper, conduct, etc., _____.

Has patient had epilepsy, apoplexy, syphilis, tuberculosis, heat exhaustion, or other serious physical disease? _____.

Evidence of sexual excess or abnormal sexual habits? _____.

History of previous attacks, if any, _____.

When and how did the first symptoms of the disease become manifest? _____.

Was there, previous to that date, any change in disposition, or evidence of physical or mental depression or disorder? _____.

Describe as fully as possible the present symptoms of insanity: _____.

What are the probable causes of the present attack, either predisposing or exciting? _____.

Do suicidal or homicidal tendencies exist, if so, how manifested? _____.

In what institutions, if any, and when, has patient received treatment? _____.

What special medical treatment has patient received during this attack? _____.

QUESTIONS FOR FEMALES.

Number of children, —; age of youngest, —; number of miscarriages, —; date of last one, —.

Has patient had any uterine or ovarian disease? —.

What menstrual irregularities, if any? —.

We hereby certify that the foregoing history is as complete as the opportunities at our command will permit.

_____, M. D.,

P. O. address, _____,

_____, M. D.,

P. O. address, _____,

Examining Physicians or Surgeons.

Date, _____, 190—.

Remarks, _____.

D.

OFFICE COMMISSIONERS OF THE DISTRICT OF COLUMBIA,

Washington, _____, 190—.

SIR: The Commissioners of the District of Columbia request the admission of _____ to the Government Hospital for the Insane under the provisions of the act of Congress approved April 27, 1904 (33 Stat. L. 316), pending a formal investigation of _____ mental condition according to law. The said _____ has been examined under the provisions of said act, and declared to be insane and a fit subject for treatment by Doctors _____.

In consideration of _____ admission to and remaining in said institution, the Commissioners agree to comply with the regulations of the Hospital in regard to the payment of board, and in all other respects.

By order of said Commissioners,

_____,
Sanitary Officer, M. P.

_____,
Secretary.

TO THE SUPERINTENDENT OF THE GOVERNMENT HOSPITAL
FOR THE INSANE, DISTRICT OF COLUMBIA.

E.

OFFICE COMMISSIONERS OF THE DISTRICT OF COLUMBIA,

Washington, _____, 190—.

SIR: It appearing from the records of the supreme court of the District of Columbia, holding an equity court (lunacy cause No. —), that a jury, lawfully impaneled and presided over by one of the justices of said court, according to law, has declared _____ to be of unsound mind and a fit subject for detention and treatment, and it further appearing that the verdict of said jury has been duly confirmed by said court, you are hereby requested and directed to admit the said _____ to the benefits and privileges of the Government Hospital for the Insane, in conformity with the statute in such case made and provided.

Witness our hands and the seal of the District of Columbia this _____ day of _____, A. D. 190—.

_____,
_____,
_____,
Commissioners of the District of Columbia.

TO THE SUPERINTENDENT OF THE GOVERNMENT HOSPITAL
FOR THE INSANE IN THE DISTRICT OF COLUMBIA.

F.

OFFICE COMMISSIONERS OF THE DISTRICT OF COLUMBIA,

Washington, _____, 190—.

SIR: It being represented to the Commissioners of the District of Columbia, through the Metropolitan police department of said District, that _____, who was committed to the Government Hospital for the Insane of this District

on the — day of —, A. D. 190—, after being adjudged to be of unsound mind by due process of law, and who was on the — day of —, A. D. 190—, discharged from said institution as "improved," has again manifested mental unsoundness with dangerous tendencies, and that if he be allowed to remain at liberty the public peace will be imperiled and the commission of crime rendered probable, you are requested to retake said person into your custody for further care and treatment at said institution.

Very respectfully,

_____,
_____,
_____.

Commissioners of the District of Columbia.

TO THE SUPERINTENDENT OF THE GOVERNMENT HOSPITAL
FOR THE INSANE IN THE DISTRICT OF COLUMBIA.

G.

HEADQUARTERS METROPOLITAN POLICE DEPARTMENT.

SANITARY OFFICE.

Affidavit of lunacy.

WASHINGTON, D. C., ——— —, 190—.

I, the undersigned, being an officer duly authorized to make arrests in the District of Columbia, do certify under oath that I have apprehended and detained ———, and from what I know and have seen of ——— I believe ——— to be insane or of unsound mind, incapable of taking care of ——— self or ——— property, and if permitted to remain at large or go unrestrained in the District of Columbia the rights of persons and property will be jeopardized or the preservation of public peace imperiled and the commission of crime rendered probable.

_____,
_____,
_____.

Subscribed and sworn to before me this — day of —, 190—.

Notary Public, District of Columbia.

VIEWS OF THE MINORITY.

The undersigned members of the special committee appointed to make a full and complete investigation of the management of the Government Hospital for the Insane beg leave to submit the following report.

The investigation made by the committee took a very wide scope; and in making this report it is desired to call to the attention of the House the prominent facts which have been proven upon the following points of investigation:

1. Treatment of the inmates.
2. Food supplied to the inmates.
3. Number and character of attendants.
4. Manner of commitment of soldiers and sailors to the hospital.
5. Disposition of the pensions of the soldiers and sailors committed to the hospital.
6. Conduct of the superintendent and the officials under him; his powers.
7. Board of visitors.
8. The importance of a lunacy commission, or of some other method of inspection.

1. The treatment of the inmates of the hospital by the medical staff is, on the whole, humane; the medical treatment is abreast with the times; the most approved and advanced methods are resorted to, and the medical staff, in that regard, are highly recommended by the profession generally. Some mechanical restraint is used, and it is a question whether some of this could not be done away with if there were in the hospital a sufficient number of attendants. It seems to be the consensus of opinion among alienists that restraint should be reduced to the minimum.

It also appears that the medical staff of the hospital frown on and sternly forbid cruelty to patients by attendants; numerous cases of dismissals of attendants for this reason appear in evidence. But that attendants have treated patients cruelly; both by blows and neglect, is proved beyond doubt. No less than 40 witnesses having testified to specific instances of cruelty, and of these 40 witnesses, 26 of them were attendants and ex-attendants. That there have been numerous other cases of cruelty is most probable, and it must be remembered that these cases have occurred since the 1st day of October, 1903. A management under which such instances could happen, and under which they continue to happen, must be faulty. The fault is partly due to the fact, it seems to the undersigned, that there are not a sufficient number of attendants, one attendant being often left on the wards without help and without supervision. It is also true that there is a certain amount of callousness displayed both by physicians and attendants, as well as a want of sympathy with these unfortunate people. See the evidence in the Gartrell case to be found on pages 1537 to 1573 of the printed record.

2. As to the food which is supplied to the inmates of the hospital there is a conflict of evidence; but it seems to the undersigned that the great preponderance of the testimony is that the food is generally badly prepared, badly served, and oftentimes is not of such a kind as to be fit for consumption, especially when the character of these people is taken into consideration. It appears that the food served from the general kitchen is cold and unpalatable, that it is sometimes insufficient, and sometimes not fit to eat. Forty-one witnesses testify to one or the other of these conditions, and these witnesses are for the most part employees of the hospital. It appears from the evidence that the meat is frequently bad, and this is not surprising when it is shown that the meat is inspected by persons who are entirely inexperienced. There is no excuse for any or all of these conditions. The Government of the United States makes a very generous appropriation for the care of these unfortunates, and if properly managed and judiciously expended these appropriations are ample to provide good, palatable food, well cooked and properly served.

3. The evidence taken in this investigation shows very conclusively, we think, that there are not enough attendants employed to take proper care of the patients. There are 2,550 patients at this hospital. A large number of these patients are old and bedridden; they are helpless, and need constant care and attention. While the officials of the hospital testify that there are 300 attendants whose duty it is to take care of the patients, yet the pay roll submitted by them, and found on page 418 of the printed record, shows that there are only 274 attendants and nurses. It may be true that other hospitals have not as many, but this institution has no excuse for economizing in this direction. Cruelty to patients, neglect of patients, the restraint used, and indeed every fault in the management has its origin in the fact that there are not enough attendants.

Forty-one witnesses testify to this need of attendants, physicians as well as attendants. When we reflect that this Government is amply able as well as anxious to take care of its soldiers and sailors, especially those so unfortunately placed, we can not admit the plea of poverty.

4. It has seemed to us that the manner of commitment of soldiers and sailors to the hospital is not in accord with those principles of law and justice which should be applied in cases involving the liberty and property of the citizens of this country. The law seems to provide that in the case of an enlisted soldier or sailor or of a retired soldier or sailor he can be committed to the hospital upon an order of the Secretary of War or of the Navy, as the case may be. It seems to us clear that these people should be entitled to a jury trial before they are deprived of their liberty.

But the case of the soldiers sent to the hospital from the different Soldiers' Homes is even worse. They are committed to the hospital upon the order of the president of the Board of Managers of the National Home for Disabled Volunteer Soldiers. No process of any kind is invoked. And from the evidence it appears that the president of the Board acts upon the ipse dixit of the surgeons of the different Homes. Surely a jury trial ought to be had in these cases, especially when it appears that men have been committed to the hospital who were not insane.

5. From the evidence it appears that besides the annual appropriation made for the support of the hospital a large amount of money is derived from the pensions of the soldiers and sailors committed there, and it does not appear that this money is spent for the benefit of the pensioners, but for the inmates of the hospital generally and for improvements to the grounds and buildings. (See pp. 1365, 1366 of the printed record; see also the evidence of Doctor White, pp. 1416, 1417 of the printed record.) We are at a loss to understand why, when the Government amply provides for the maintenance and care of the soldiers and sailors, the pensions of these men should be diverted from their use to the general use of the hospital. A law should be enacted providing that these pensioners should get the benefit of their pensions. It appears that there is now in the Treasury \$130,000 to the credit of pensioners who are inmates of this hospital, and the superintendent contends that five-sixths of this amount can be spent for the general purposes of the hospital. Congress appropriates for the maintenance and support of these pensioners the sum of \$220 per man per year. Some of the pensioners draw \$96 per year and some of them more than this; so, instead of \$220 per year, the hospital is really spending \$300 per year, and in some cases a larger sum, per man, and at the same time these pensioners are not getting the benefit of their pensions. From what we could learn, it is difficult to say how much is spent each year for the maintenance and support of this hospital.

6. It is desired to call attention to the very large powers exercised by the superintendent, who practically appoints every employee of the institution and fixes the salaries of these employees. We think that the superintendent should employ those who have to serve under him, but we believe that Congress should fix the salaries of these employees. So far as it is known to us, this is the only institution under the control of the Government where Congress does not fix the salaries and determine the number of those who shall be employed. It would be superfluous to point out the evils which inevitably result from placing in the hands of one man the power, not only to fix salaries, but to raise and lower them at his will and pleasure. The manner in which appropriations are made for this hospital seems to us faulty. There ought to be a separate bill prepared by the Committee on Appropriations in which the items for the hospital should be set out in detail. The method of lump appropriations has long since been recognized as vicious legislation, and no valid reason can be given for its continuance in this instance.

It also seems to us that the superintendent should be appointed by the President. His office is a most important one, and great care should be used in filling it. We might call attention to the Maenche case for the purpose of showing to what extent the power of the superintendent extends and how it may be abused. Maenche is the superintendent of the laundry, where a large number of people are employed. He was reported on two occasions for an offense against the regulations. No investigation was ever made of these charges, and no excuse was given for the failure to investigate them, although it appears from the evidence taken by the committee that the charge was well founded and that the superintendent of the hospital could easily have ascertained the facts in the case.

7. The functions of the board of visitors are set forth in the

statute, and doubtless when this institution was founded the board could adequately perform the duties assigned to them, but with the growth of the hospital it has been more and more impossible for the board of visitors to exercise that amount of supervision which it seems to us is necessary for the well-being and proper government of the hospital. The legal adviser of the board expressed the opinion (and that opinion has been acted upon) that the law contemplated only one visitation a month. The hospital has grown to such an extent that it has become impossible for the board to inspect it, and, as a matter of fact, there are many wards into which the board of visitors do not go once in a year.

8. In this age inspection has become one of the most important agencies in the government of all institutions. There is, so far as we know, not a State whose hospitals are not subjected to inspection by competent boards appointed for the purpose. And this inspection is not performed by those directly connected with the hospital, but by disinterested and impartial men whose duty it is to report upon every phase of the management, and without fear or favor fearlessly expose any abuse which may exist.

The Government Hospital for the Insane is subject to no inspection except by its superintendent and its board of visitors. Manifestly it should be inspected by some such agency as would correspond to the lunacy commissions of the States. Every witness who testified on this subject, with very few exceptions, was of the opinion that some such system should be inaugurated. It is true that Doctor White, the superintendent, opposed such a method of inspection (see printed record, pp. 913-914), but, on the contrary, the following eminent men were in favor of it: Doctor Clark of the hospital, Judge Maury of the board of visitors, Doctors Zeller, Eyman, Robins, Vaughn, Hutchinson, Wolfe, and Drury, Surgeon-General Wyman, and Mr. McGaar of the lunacy commission, of New York. The importance of such inspection is demonstrated by the investigation made by your committee, and common sense, and experience in other institutions of this character dictate the necessity for it.

The undersigned would therefore recommend that a commission of lunacy be created for the District of Columbia, to be composed of three members whose terms of office and compensation shall be fixed by Congress. One member to be a surgeon in the Army, to be designated by the Secretary of War; one to be a surgeon in the Navy, to be designated by the Secretary of the Navy, and one to be a citizen of the District of Columbia, to be designated by the Commissioners of the District. The powers of the commission should be fixed by law.

The undersigned would also call attention to the loose management of the finances of the institution. The superintendent seems to think that he can take care of, in detail, all the affairs of the hospital, and from this has arisen a good many abuses, notably the farm management.

Respectfully submitted.

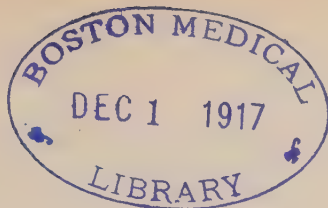
JAMES HAY.
ROBT. M. WALLACE.

HEARINGS

BEFORE THE SPECIAL COMMITTEE ON INVESTIGATION OF THE
GOVERNMENT HOSPITAL FOR THE INSANE.

PART 1.

1807
20



INVESTIGATION OF THE MANAGEMENT OF THE GOVERNMENT HOSPITAL FOR THE INSANE.

HOUSE OF REPRESENTATIVES, U. S.,
FIFTY-NINTH CONGRESS,
May 4, 1906.

The committee appointed by the Speaker of the House of Representatives to investigate the management of the Government Hospital for the Insane met at 10 o'clock a. m.

Present: Messrs. Olcott (chairman), Smyser, Barchfeld, and Hay.

Also, Hon. Frank Clark, a Representative from the State of Florida; Mr. Richard P. Evans, representing the Medico-Legal Society of the District of Columbia; Dr. William A. White, superintendent of the Government Hospital for the Insane; Dr. F. M. Gunnell, chairman of the Board of Visitors of the Government Hospital for the Insane; Mr. F. A. Fenning, and Mr. Stuart McNamara, assistant United States attorney for the District of Columbia.

METHOD OF PROCEDURE.

The CHAIRMAN. The committee has met this morning in pursuance of the following resolution passed by the House of Representatives:

Resolved, That the Speaker of the House of Representatives be, and he is hereby, directed to appoint from the membership of the House a committee of five, with full power and whose duty it shall be to make a full and complete investigation of the management of the Government Hospital for the Insane and report their findings and conclusions to the House; said committee is empowered to send for persons and papers, to summon and compel the attendance of witnesses, to administer oaths, to take testimony and reduce the same to writing, and to employ such clerical and stenographic help as may be necessary, all expenses to be paid out of the contingent fund of the House.

Mr. Padgett has written a letter to me saying that, on account of the illness of one of his children, he was obliged to go to his home and could not tell exactly when he would return.

The first thing we will do this morning is to ask Mr. Clark if he desires to give any testimony.

Mr. CLARK. No; not personally.

The CHAIRMAN. Then, so far as you are concerned, you do not wish to appear here as a witness.

Mr. CLARK. I understand that some one is here from the Attorney-General's Office. For what purpose does he appear?

The CHAIRMAN. Mr. McNamara, from the district attorney's office, has come here and stated that the Attorney-General has asked him to appear on behalf of the Attorney-General's Office.

Mr. McNAMARA. Mr. Chairman, perhaps I should explain that I am not connected with the Attorney-General's Office. I am assistant United States attorney for the District of Columbia, and at the request of the Attorney-General I have been assigned to appear here, not especially in the interest of Doctor White or in the interest of the hospital, but simply to see that whatever interest the Government may have in this matter may be conserved. In other words, I hold no partisan brief, and the Government is equally interested with the committee in having the actual facts brought out.

Mr. CLARK. Mr. Chairman, I am perfectly content, as the mover of this resolution, that this committee should make the investigation and interrogate the witnesses; but if the asylum officials are to be in any manner represented here by counsel, who are to cross-examine the witnesses brought here, I think it should appear. If the committee are going to waive their right to examine and cross-examine witnesses, or are going to delegate that right to other people, counsel, who are here to represent the asylum officials or any of these persons who are charged in this resolution, I think it but right and proper that the persons interested in preferring these charges should also be represented.

The CHAIRMAN. I do not think the question as to the right of Mr. McNamara to examine witnesses is yet properly before the committee. I think that will be a matter for the committee to consider later on, as to whether that course of procedure will be permitted. The gentleman now merely comes voluntarily, as a looker on.

Mr. CLARK. Of course there is no objection to that.

The CHAIRMAN. Of course to that there can be no objection; but when the question comes up as to the right to examine and cross-examine witnesses it is a matter which I think the committee should consider in executive session.

Mr. CLARK. I know of nothing I can say to you now, except to outline to you what we expect to show, if you would like to hear it.

Mr. McNAMARA. While we are on this point I want to say that I think the committee have not understood what I stated. I do not want the committee to understand anything I have said to be a waiver of my right to press, hereafter, the right to cross-examine witnesses. I understand that question will be settled by the committee; but I do not want to be understood as waiving that by any statement I have made.

Mr. SMYSER. Mr. Chairman, I think we should meet the situation as it arises. I do not know what the rest of you gentlemen may think about it, but I feel that under the resolution we are authorized to act, and we have a single duty to perform here. In the discharge of that duty it may be that Mr. Clark might be of invaluable assistance to this committee. He may have some information about matters that are within his personal knowledge or that may have come to him; and so Mr. McNamara, representing the Department of Justice here, may have some suggestions to make in the way of questions to be asked that would be invaluable. I have no feeling about the matter, and if these people are guilty of what it is alleged they are guilty the committee ought to know it.

Mr. HAY. I think we all agree to that.

The CHAIRMAN. I agree with you perfectly.

Mr. SMYSER. There should not be any friction between the Government and anybody else. I know there is not, so far as I am concerned.

Mr. HAY. So far as I am personally concerned I would not object to these gentlemen having attorneys to examine witnesses put upon the stand.

The CHAIRMAN. I think we should have the assistance of everybody who knows anything about this matter, and it is immaterial to me whether he represents Mr. Clark, or Mr. Evans, or the Medico-Legal Society.

Mr. CLARK. I am not a party to this proceeding. As a Member of Congress I introduced the resolution because, under the facts in my possession, I thought it was the duty of the House of Representatives to know how things were going over there. That is the only interest I have in it. I never saw Doctor White until I saw him in the Speaker's room the other day.

Mr. HAY. In order to get this matter before the committee, as the charges are before us under the resolution, I suggest that the gentlemen who are making these charges give us the names of the witnesses by whom they think the charges can be sustained. We can then have the witnesses summoned and proceed with the investigation.

Mr. SMYSER. Three of us are lawyers. Are you a lawyer, Mr. Barchfeld?

Mr. BARCHFELD. No; I am only a doctor.

Mr. SMYSER. I think Mr. Clark is also a lawyer, and that he could be of very material aid in the way of suggesting what witnesses should be called. We will, perhaps, come to a point where we will have cumulative testimony, so I suggest that they should exercise judgment and discretion, as no doubt they will, as to the character and number of witnesses produced. In saying this I do not mean, so far as I am concerned, to suggest that the investigation should be restricted. I think it should take the widest latitude, but be kept within reasonable limits.

Mr. HAY. I think we can judge of that as the witnesses come before us.

Mr. SMYSER. That is true. My suggestion may be premature.

STATEMENT OF HON. FRANK CLARK, A REPRESENTATIVE FROM THE STATE OF FLORIDA.

Mr. CLARK. Mr. Chairman, with your permission I will state that this matter was first called to my attention by the accounts I saw in the Washington newspapers with reference to it, involving charges made by the Medico-Legal Society, of Washington. I saw the seriousness of those charges and investigated them. I met Mr. Evans, who is the attorney for the Medico-Legal Society; Doctor Evans, who is the secretary of that society, and Doctor Reyburn, who is the president, and from those gentlemen I gleaned considerable information. Upon the strength of that information I introduced this resolution.

We would like to have the committee begin this investigation at the time when Doctor White took charge of the institution. I think that is eminently fair. We expect to show by the witnesses, a list of whom I have here, that extreme cases of cruelty have been practiced

upon patients; that patients have been choked around the neck with wet towels until they were unconscious, and that they have been knocked down and brutally treated on a great many occasions by various attendants.

We expect to show, further, that Doctor White was notified, particularly with reference to one of these cases, and paid no attention to it. We expect to show that letters were addressed to him, and that a personal interview was had with him by an attendant who went there the very day Doctor White took charge of the institution, and who was there from that time on until the 21st of last month, who on that day quit of his own accord and has been solicited to return there, so good an employee was he. We expect to show that he not only wrote Doctor White, but had a personal interview with him, and Doctor White did nothing. We expect to show numerous instances of that character.

We expect to show, further, Mr. Chairman, that it has been the custom of Doctor White to go into court in lunacy proceedings and ask for a writ of lunacy to be issued in the case of some old soldier incarcerated in the asylum, and that it was his invariable practice in the petition for the writ to name Mr. Fenning as the proper person to be named as the committee of the lunatic, Mr. Fenning being an attorney here in the city. We expect to show that that was done, and that usually the attorney who drafted the petition was Mr. Fenning's law partner, whose name I do not now recall, and that he received a fee. Mr. Fenning, as the committee, received a fee of 10 per cent, and the court officials received fees, all out of the pittance due to the old soldier by the General Government. That can be shown by the court records, and we will want the clerk of the court to be summoned to appear here with the records. I think we can show there have been some 50 or 60 of these cases.

Our insistence along that line is that a man, in the first place, should not be incarcerated in this hospital for the insane until his sanity or insanity has been determined.

Mr. SMYER. Do you mean an old soldier?

Mr. CLARK. Yes, sir. We do not think he should be put there with insane people when he is a sane man. Another position we have been insisting on is that the criminal insane should be separated from the other insane.

The CHAIRMAN. Do you know whether that is done or not?

Mr. CLARK. My information is that it is not done. It may be done at the present time, Mr. Chairman, because my information is there has been a great deal of cleaning up over there since this resolution was originally introduced, and there was some prospect of this investigation. That is why I want this investigation to go back to the period when Doctor White took charge. I have no doubt that everything is in the finest shape in the world right now, and my information is to that effect.

We also expect to show that they have a farm over there amounting to some 500 acres. Mr. Evans, who has made a very careful examination of the expenses of running that farm, informs me that there is a deficit of about \$30,000 a year. Of course if that is true it should not be allowed.

So that these charges involve cruel and inhuman treatment, and the question of these proceedings in court. I do not want to use any harsh expression in reference to this matter; but there is one case which I presented in my address in the House, of an old soldier who was entitled to \$226 and interest, and it cost him \$80 to get that money. We insist that is wrong and that it should be remedied, and should not be permitted.

I have here a list of witnesses which we have prepared, and there are other witnesses we will submit when you gentlemen desire them. I think, in brief, that is about all the statement I have to make; but if you desire to ask me any questions I am, of course, ready to answer them.

I disclaim, so far as I am concerned, any feeling whatever in this matter. I have no personal acquaintance with any of these gentlemen, never saw the hospital in my life, and could not go to it to-day. I acted simply upon the proposition that it was a Government institution, and that if these things were going on there they should be stopped, and that if they were not going on, the facts should be known.

I may state to the committee that Mr. Evans had notice to be here, and is here, if you desire to hear anything from him.

Mr. BARCHFELD. Mr. Chairman, do you not think, as a matter of equity and justice, the head of this institution should be permitted to be present by counsel?

Mr. HAY. If he desires it, of course.

Mr. BARCHFELD. They can make any kind of charges against him, and he has no possible chance of protecting himself.

Mr. HAY. I was just going to suggest that in view of the fact that Mr. Clark has stated what they expect to prove, that Dr. White should be given an opportunity to make a statement also, just as counsel for the plaintiff and defendant generally make statements to the jury before they open the testimony in the case. If Dr. White desires to make any statement, I think he should be permitted to do so.

Mr. SMYSER. I suppose we all agree that the presumption would be that the institution has been properly conducted.

The CHAIRMAN. I undoubtedly think so.

Mr. SMYSER. Then come these allegations or charges. I should think it would be only fair to both sides that Dr. White should have an opportunity to make a statement if he desires it.

Mr. CLARK. I think you are right about that. I think the presumption is in favor of the innocence of the accused at all times.

Mr. McNAMARA. If the committee will permit me, I would like to say that I think it would be better policy for any statement that Dr. White may have to make, if he is to be put in the position of a defendant here, at an appropriate time; that is, at the opening of his case. We are here in a matter where it may not be necessary to make any statement. It may not be necessary for Dr. White to go into proof of the case. We have not yet been apprised as to what there is before the committee.

Mr. HAY. Now, as I understand it, you are appearing for Dr. White. A moment ago you said you were here just as a looker-on. We would like to know about this matter.

Mr. McNAMARA. I expressed myself as being here in the interest of the Government, inasmuch as this is a Government institution.

Mr. HAY. That is all right.

The CHAIRMAN. As I understand it, then, you prefer that no statement should be made by Dr. White, until after we have heard the witnesses upon the charges.

Mr. McNAMARA. I have made that suggestion.

The CHAIRMAN. If that coincides with the ideas of Dr. White, we will let it go.

Mr. SMYSER. In other words, Dr. White, at the present time, is willing to stand on the presumption of law in his favor.

Mr. McNAMARA. Yes; we are not taking advantage of any technical rules whatever; but in order to go into the matter regularly, we would like to see what there is before the committee before we attempt to answer it.

Mr. CLARK. Mr. Chairman, I do not want to appear as taking a position I ought not to take, or anything of that kind, as a Member of Congress or as the mover of this resolution. But Mr. McNamara states that he is here, as I understood him in the first place, simply to look after the interests of the Government. He now appears in the rôle of Mr. White's attorney, because he is taking steps to look after his interests. I would like to know, and I think I have the right to know, whether Mr. McNamara has been instructed by the Department of Justice to appear here as the attorney for the asylum or any of the officials of the asylum. I think the committee has a right to know that, and I think I, as a Member of Congress, have a right to know it. I may then want to know by what right the Department of Justice sends a representative before an investigating committee to represent officials, whose official conduct is brought into question. I think Mr. McNamara ought to candidly state to the committee exactly what his instructions are and in what capacity he appears here. I do not think the Department of Justice is in the habit of sending counsel to protect or defend department officials who are charged with dereliction of duty, but if they have taken that new departure I want to know it. I think he should state in just what capacity he is here.

Mr. McNAMARA. I should be very glad indeed to comply with that request. The instructions I have received are very brief. They are, simply, in the last analysis, that a Government agency is being investigated. The Government has a primal interest in knowing how this Government agency is conducted, and if it has been wronged it wants to know how it is wronged and by whom. If it should turn out that these charges are not properly established, it wants to know that. I have been specifically instructed that I represent no official. I do not represent Doctor White any more than I represent Mr. Evans or the Medico-Legal Society. I have made this suggestion as to the course of procedure to be followed on behalf of the institution. It may be that, in the course of the investigation here, the paths of Doctor White and of the institution may cross, and in that case I might be appearing for him; but I have no specific instructions to represent Doctor White, or any official or agent connected with the hospital. Of course it is absurd to say that the Department of Justice would be sending counsel to protect a mere officer of an eleemosynary institution.

The CHAIRMAN. Mr. Evans, do you wish to give any testimony? I mean to ask if you are now in a position to be sworn as a witness to testify as to anything you, individually, know?

Mr. EVANS. I think my name is on the list of witnesses. That list was prepared with the idea of taking up different points consecutively; and when I am called, if there are any matters outside of the particular point upon which I propose to testify and can testify with absolute knowledge, which you want to take up with me, I would go into it and would be subject to examination and cross-examination. I have no objection at all to being sworn now and then making a statement.

The CHAIRMAN. We do not want a statement which merely reiterates what Mr. Clark has said. We do not want a mere statement of what you expect to prove by the witnesses to be produced. I merely ask you now whether you desire to give any testimony this morning, or whether you prefer to wait until we have examined some of these witnesses.

Mr. EVANS. I prefer to wait until it is taken up in regular order, according to the list prepared.

The CHAIRMAN. Have you any particular desire as to which of these witnesses you want to have called first?

Mr. CLARK. Mr. Chairman, in the list we have put them in the order in which we think they should be called. I will state further that I gave Mr. Hay, the other day, a short memorandum showing what we thought the witnesses would testify.

The CHAIRMAN. So that from the memorandum which Mr. Hay has we can know on what subject these several witnesses expect to testify.

Mr. CLARK. Yes, sir; I do not know that every one of them appear on that statement, but I think most of them do. I have here also another statement which I think may help you somewhat.

Mr. SMYSER. I would like to ask Mr. Clark one question. You say you would like to have the investigation cover the period of Doctor White's incumbency of the office?

Mr. CLARK. Yes, sir; I think that would be fair.

Mr. SMYSER. Is it your idea that it should be limited to that time?

Mr. CLARK. No, sir; it is not.

Mr. SMYSER. The time when Doctor White assumed the management there should be stated in the record, and it could be agreed upon.

Mr. CLARK. Yes; Doctor White can state that. I think he has been there about two years and a half.

Mr. SMYSER. When did you go there, Doctor White?

Doctor WHITE. I assumed charge on October 1, 1903.

The CHAIRMAN. Then I understand it is admitted that Doctor White assumed charge of the hospital in October, 1903.

Mr. CLARK. In further answer to Mr. Smyser's question, I want to say that my idea is this examination, while it ought not to cover the whole world and bring in irrelevant and immaterial matter, ought to cover such a period as will enable you gentlemen to ascertain the truth as to what has been done, and what remedies, if any, should be suggested.

The CHAIRMAN. I do not think you need have any fear, but that is what the committee intend to do.

MR. CLARK. If, at any time, Mr. McNamara, representing Doctor White, proposes to cross-examine these witnesses, I ask that you gentlemen will give me notice so that I can have Mr. Evans or some one else to represent their side of the controversy, because those gentlemen are as much interested as the others. They have made these charges and they ought to have an opportunity to make good. My own opinion is that there should be no examination or cross-examination permitted by anyone outside of the members of this committee, because you gentlemen are qualified to get the facts without the assistance of anybody. But still, if it is to be allowed on one side we propose to insist upon it on the other.

MR. HAY. I understand that Mr. Evans is the attorney for this society.

MR. CLARK. Yes, sir.

MR. HAY. I assume that if he desires to examine witnesses the committee will have no objection to his doing so.

MR. CLARK. If you agree upon that course at all.

THE CHAIRMAN. If we allow anybody other than the members of the committee to examine witnesses there is no doubt whatever that we will allow Mr. Evans, representing the Medico-Legal Society, that privilege. I think myself that the chances are the committee will make all the examination for itself. That will be the only way we can ever get through. If every witness who comes here wants to be represented by counsel we will have to sit all summer.

MR. HAY. As this Medico-Legal Society is interested in this proceeding, I would like to know what the society is, where it was chartered, and who compose it.

THE CHAIRMAN. I suppose Mr. Evans could give that testimony now.

MR. EVANS. If there is any desire to go into the history of the Medico-Legal Society, I presume that I could, to a certain extent, answer for them.

MR. HAY. I simply want to know what it is.

MR. BARCHFELD. If Mr. Evans is going to testify, I would insist that he should be sworn.

TESTIMONY IN SUPPORT OF CHARGES.

TESTIMONY OF RICHARD P. EVANS.

RICHARD P. EVANS, being duly sworn, was examined and testified as follows:

THE CHAIRMAN. Mr. Evans, will you answer the question of Mr. Hay as to what the Medico-Legal Society is, when chartered, and who compose it?

MR. EVANS. The Medico-Legal Society is a society incorporated in the District of Columbia, composed of attorneys, physicians, and druggists, I believe. I have been a member since its organization; but as I belong to a great many societies and can not attend them all I have been very derelict in my attendance upon its meetings. The purpose of the society is set forth in the charter or act of incorporation, which is on file in the recorder's office in this city. We have a regular constitution and by-laws, and have meetings from time to time. At one time, I believe, the mailing list was somewhere in the

vicinity of eighty or ninety members. Since the publication of this report there have been some resignations from the society, and at the present time I am not positive as to the exact number of members. I presume it is somewhere in the vicinity of fifty or sixty. We expect to hold a meeting within two or three days, and I will then be able to state definitely the names and number of the present membership.

Mr. CLARK. Mr. Hay wants to know what the purpose of the society is rather than anything else.

Mr. EVANS. I could not state, from recollection, the exact purpose of the society, except that it is for the discussion of matters that would be of either legal or medical interest to the District of Columbia, especially, and to promote social feeling among the members of these different professions in the District.

The CHAIRMAN. Who are the officers of the society?

Mr. EVANS. The officers are: Dr. Robert Reyburn, president; Dr. Charles M. Emmons, secretary; Doctor Robinson, treasurer; Doctor Hughes, vice-president, and I am the attorney. James E. Padgett is associate attorney.

Mr. HAY. When was this organization first formed?

Mr. EVANS. I think it was in 1903. I do not remember the exact date, but it was several years ago.

Mr. HAY. How soon, after it was formed, did it undertake the investigation of the Government hospital?

Mr. EVANS. I do not think we paid any attention to that until about August of last year.

Mr. SMYER. Did the organization call the matter, to which complaint is now made, to the attention of the board of visitors?

Mr. EVANS. No. Doctor Emmons and I were appointed a special committee, not so much to investigate the hospital as to investigate and report upon the methods of management, care, and treatment in this hospital as compared with the best methods in vogue in other institutions of a similar character throughout the United States. We entered into a large correspondence, and got reports, I think, from some eighty or ninety institutions and letters from a good many of the presidents and superintendents of those institutions. Then our purpose was to present the matter to the society for its action in precisely the way in which it is presented in the report of which you have a copy, with recommendations of certain legislation that might bring this institution and its methods up to as high a standard as exists elsewhere in the United States.

The CHAIRMAN. How long have you resided in the city of Washington?

Mr. EVANS. I have resided here since 1865, when I came here from New York State. I have been outside of the city as a resident, but never as a business man.

The CHAIRMAN. How long have you practiced law here?

Mr. EVANS. I have practiced law here since June, 1875.

The CHAIRMAN. You are in active practice now?

Mr. EVANS. I am.

Mr. BARCHFELD. How many meetings has this Medico-Legal Society held since its incorporation?

Mr. EVANS. I am sorry to say I can not answer that. I know that I used to receive quite a number of printed cards and received

quite a number of personal requests from members to be present at meetings; but they held their meetings on a night when I felt that my duty required my attendance at the meetings of the Knights Templar.

Mr. BARCHFELD. Did they meet once a month or once every three months, or once every six months?

Mr. EVANS. The constitution provides for a meeting once a month, and also for meetings at the call of the president. At first I think they met very regularly, but subsequently the meetings became irregular.

Mr. SMYSER. From the 1st of January, 1905, down to the present time, how many meetings has it held?

Mr. EVANS. I think there have been some four or five meetings.

Mr. SMYSER. How many attended the meetings?

Mr. EVANS. That I can not say.

Mr. SMYSER. Is there any record of it?

Mr. EVANS. I do not know that they kept a record of the number in attendance. They kept a record of the meetings. The constitution provides that five shall constitute a quorum for the transaction of business. There was one meeting at which this report was first presented at which there was quite a preparation made for a large crowd, but it was on the night that we had our great snowstorm, and we did not have a quorum on that night to transact business.

Mr. SMYSER. When was that?

Mr. EVANS. That was somewhere near the 8th, 9th, or 10th of February.

Mr. SMYSER. Of this year?

Mr. EVANS. Yes, sir.

Mr. SMYSER. In the investigation which you started out to make for the purpose of comparing this institution with other like institutions, did you ever call on the superintendent or on the board of visitors for the purpose of getting the information you were seeking?

Mr. EVANS. No; I never called upon the superintendent for that purpose?

Mr. SMYSER. Did you call upon the board of visitors?

Mr. EVANS. No; I never did.

Mr. SMYSER. You were advised of the fact that there was such a board in the city, appointed by the President, were you not?

Mr. EVANS. Yes.

Mr. SMYSER. Did you ever call upon the Secretary of the Interior?

Mr. EVANS. I called upon the Secretary of the Interior when I desired to present that report, and he would not see me.

Mr. SMYSER. When was that?

Mr. EVANS. It was immediately after the report was printed.

Mr. SMYSER. When was the report prepared?

Mr. EVANS. I think the report went into print about the 18th or 20th of February.

Mr. SMYSER. Of this year?

Mr. EVANS. Of this year. It was presented on the 8th of February, I think.

Mr. BARCHFELD. That was twelve days after the big dinner, on the night of the big snowstorm?

Mr. EVANS. Yes; the night of the big snowstorm.

Mr. SMYSER. Did you present your report to the board of visitors at any time?

Mr. EVANS. I forwarded copies to the secretary of the institution, who is secretary of the board.

Mr. SMYSER. Do you know of any effort having been made by the society of which you speak to have a meeting or conference with the board of visitors for the purpose of discussing what you believed you had discovered in respect to the management of the institution?

Mr. EVANS. No; I did not think it was worth while, for one thing. As a matter of fact it never entered my mind that it was necessary to do that, or that it would serve any good purpose. Doctor Reyeoun presented one case to the attention of the president of that board, and it was very cavalierly treated, in his opinion.

The CHAIRMAN. Did you send this report out generally throughout the country to the institutions with which you corresponded?

Mr. EVANS. No; but I think it has been sent to some from which we had personal letters.

The CHAIRMAN. Was it sent to the press here in the city of Washington?

Mr. EVANS. No; I sent none to the press.

Mr. SMYSER. The question was whether it was sent to the press.

Mr. EVANS. I don't know. I know it was largely published in the press.

Mr. SMYSER. Do you know how the press got the substance of the report?

Mr. EVANS. I do not know how the Post got it. I know how the Times got it.

Mr. SMYSER. How?

Mr. EVANS. The Times got it because Doctor Emmons and I went there. He suggested to me that they wanted some of the matter relative to a bill which had been introduced for the separation of the criminal insane; and I know we went there together and gave them some portions of the report.

Mr. SMYSER. Can you tell me who comprise the board of visitors?

Mr. EVANS. I have the report of the hospital for this last year, which gives those names. I could not state them from memory.

Mr. SMYSER. Do you know who comprised the board during the month of February last?

Mr. EVANS. Personally, I only know one person on that board, and that is the Rev. Teunis S. Hamlin, of Washington, D. C. I knew there was a board, but he was the only one whose name I knew as a member of the board.

Mr. SMYSER. When you called on the Secretary of the Interior, you knew the fact that there was a board of visitors, did you not?

Mr. EVANS. Yes; I certainly did.

Mr. SMYSER. But, as I understand it, you had never gotten into communication with that board?

Mr. EVANS. No.

Mr. SMYSER. You were also familiar with the requirements and duties of this board, by law, were you not?

Mr. EVANS. I knew that the law under which they were appointed required them to exercise such supervision over that institution as would inspire the confidence of the public in its management, but I

knew they had not exercised that supervision and that they were the last people in the world to whose attention such matters should be called with any expectation of having a remedy applied.

Mr. SMYSER. How did you know that?

Mr. EVANS. For the reason that the outcome, whatever it was, would not be very complimentary to them under these facts. It would be a reflection upon them as much as upon the superintendent of that institution.

Mr. SMYSER. Do you know that as a matter of fact, or was it by a species of reasoning you arrived at that conclusion?

Mr. EVANS. I know it as a matter of fact and because the same thing is stated in a letter from the Secretary of the Interior to the District of Columbia committee of the Senate, wherein it is suggested that amendments to a bill which was introduced authorizing the board of visitors to conduct this examination, should be stricken out; and among the reasons given there is that one clause in the measure would disqualify the board of visitors, because of their personal interest in the result.

The CHAIRMAN. Do you say there was a letter from the Secretary of the Interior which contains the allegation that the board of visitors were not properly fulfilling their duties?

Mr. EVANS. It is embodied in a report by Senator Gallinger, the chairman of the Senate Committee on the District of Columbia, in which he reports the bill with all of the amendments stricken out, and as the basis of his report he puts in this letter from the Secretary of the Interior, which I understand was prepared by Judge Maury, the legal member of the board of visitors. In that he states that a certain clause in the amendments, which provides that no person who shall be involved directly or indirectly by any of such charges shall be qualified to sit as an officer of said board, would disqualify the secretary and all the members of the board, because they were interested in the result of the investigation.

The CHAIRMAN. That was in the report on the Senate bill.

Mr. EVANS. In the report on the Senate bill. I think I have a copy of it here, if you would like to see it.

The CHAIRMAN. We would like very much to see it, if you have it.

Mr. EVANS. It is House bill No. 15643, and it is now on the Senate calendar No. 2805.

The CHAIRMAN. Is that in the present Congress?

Mr. EVANS. Yes. There is a bill which was introduced by Mr. Grosvenor, and here is the report which I referred to. In this report the Secretary makes the very astounding statement that the investigation should not be conducted according to the ordinary rules of evidence, as that would tend to keep out the facts. As a further reason I will state this: That over two years ago similar charges and complaints were made by Thornton O. Pyles, an attendant, and I think the chief attendant in one of the wards. That complaint or petition was signed by a large number of attendants and employees in that institution. It went to the board of visitors, and a day was appointed for the investigation. About a week before the investigation the resignation of Mr. Pyles was called for. He was the head one in the movement, and he refused to resign. Then he was summarily discharged on the morning of the day the investigation was to take place, and, if my information is correct, orders

were issued to arrest him if he appeared upon the grounds. He did appear upon the grounds and was arrested.

The CHAIRMAN. When was this done?

Mr. EVANS. That happened about two years ago.

The CHAIRMAN. Is he named as one of the witnesses?

Mr. EVANS. He is one of the witnesses here. The investigation was conducted, and there was a number of attendants called before the board; but they had this bright, shining example of what happened to Pyles before their eyes, and of course they had no complaints to make. I am informed that Doctor Gunnell sent for some of the meat that was complained of, and one of the finest pieces of corned beef the market could afford was exhibited to him. He took a piece of it and tasted it, and then said if that was the kind of meat they furnished he would like to board there himself. That is what I am informed. Under those conditions I did not think it was worth while to call the attention of the board of visitors to that matter.

Mr. SMYSER. I notice that you are giving us hearsay information. From what source can we get the original information, which you are giving as hearsay?

Mr. EVANS. You can get that from Thornton O. Pyles, who is on that list as a witness, and from the other attendants and employees whose names are signed to that petition, which I would like to have the committee call for from the records of the hospital.

Mr. BARCHFELD. During your existence as an incorporated body, say, from 1903, have you performed any other work in the line of investigating institutions?

Mr. EVANS. To my knowledge there have been some other lines of work gone into. I believe there has been a committee appointed to investigate and report as to the pollution of the Potomac River, and to devise some means to avoid it.

Mr. BARCHFELD. That is a big subject.

Mr. EVANS. Yes. I think that one member of the society has paid a good deal of attention to that, and I am very certain that he has furnished some part of the matter he secured to the press.

Mr. BARCHFELD. Have you investigated any other hospital? You have here the Columbia Hospital for Women?

Mr. EVANS. No; we have had no occasion to do that, except that, in looking into this matter you will find recommendations of the committee in the report to the effect that we think all the institutions under Government control here should have a more rigid inspection, a good deal in the line of the postal and customs service. This board of visitors business is a very perfunctory business, and involves usually a nice lunch. We think that all of these institutions, for which the Government has appropriated money, should be under some real, active supervision.

Mr. BARCHFELD. It is customary for all these boards of management to have luncheon, is it not? Even the Medico-Legal Society has lunches?

Mr. EVANS. Yes; and I have heard that committees of Congress have luncheon. All of the boards I have ever been connected with, as a rule, at their annual or semi-annual meetings, have had something in that line.

Mr. SMYSER. Have you any witnesses to call to-day?

Mr. EVANS. I could get hold of some in a very short time.

Mr. McNAMARA. May I ask the courtesy of the committee to allow me to propound a question to the witness? I want to find out, in some detail, about the organization of this society, so as to know what these charges are.

Mr. EVANS. I am perfectly willing to answer any questions.

Mr. CLARK. If you are going into that I want to object. The Medico-Legal Society has not a thing on the face of the earth to do with this matter, and it makes no difference whether it is composed of one member or four thousand members. The question is whether these charges are true.

The CHAIRMAN. What is the question you would like to put? If it is a proper question, we will ask it ourselves.

Mr. McNAMARA. I want to know if this society is incorporated in the District of Columbia.

Mr. EVANS. Yes; it is.

Mr. McNAMARA. Did you file your annual report?

Mr. EVANS. I don't know anything about that.

Mr. McNAMARA. Are you not the attorney for it?

Mr. EVANS. Yes.

The CHAIRMAN. I think we had better suspend that line of examination.

Mr. McNAMARA. Will you ask him what his duties are? I want to find out whether there is a legal body to which we can look in this matter.

Mr. CLARK. They are not on trial.

Mr. EVANS. It seems to me that every time I have any matter for this society in court in comes the district attorney, and for some reason or other he opposes, gets delays, and one thing and another.

Mr. McNAMARA. Not at all.

The CHAIRMAN. I do not think it is necessary to go into this subject. As you have stated that, so far as your other testimony is concerned, you would rather wait until we examine the other witnesses, it will be unnecessary to continue any longer. Of course, we will not absolutely promise that we will take up these witnesses just in the order you have arranged them. I understand that in some of the papers you have handed the committee there is a résumé of the testimony of some of these witnesses.

Mr. FENNING. Before Mr. Evans leaves the stand, may I make a statement? I am included, to an extent at any rate, in the charges made by this society, and I would like the Chairman to ask Mr. Evans, who has named six members of the society, if he can name a half a dozen other members of that society.

Mr. CLARK. To that we object, because it has no relevancy.

Mr. EVANS. I could file a list of sixty or seventy.

Mr. SMYSER. You are not called upon to answer that question, Mr. Evans.

Mr. CLARK. Before you adjourn there is one suggestion I would like to make, and that is that you hold your sessions for the examination of witnesses here. I do not think you would come as near getting the exact facts from these employees, if you examine them at the asylum, as you would if you examine them here.

Mr. SMYSER. I suggest, Mr. Chairman, that you issue subpoenas for enough witnesses to give us a day's work to-morrow, and let us meet here to-morrow.

The CHAIRMAN. If there is no objection that suggestion will be carried out.

The committee (at 11.15 o'clock a. m.) adjourned until to-morrow (Saturday), May 5, 1906, at 10 o'clock a. m.

HOUSE OF REPRESENTATIVES, U. S.,
May 5, 1906.

The committee met pursuant to adjournment, at 10 o'clock a. m.

Present: Messrs. Olcott (chairman), Smyser, Barchfeld, and Hay.

Present also, Hon. Frank Clark, Dr. William A. White, Mr. Richard P. Evans, Dr. F. M. Gunnell, Mr. F. A. Fenning, and Mr. Stuart McNamara, and others.

TESTIMONY OF JAMES W. BURROUGHS.

JAMES W. BURROUGHS, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. State your full name.

Mr. BURROUGHS. James W. Burroughs.

The CHAIRMAN. Where do you reside?

Mr. BURROUGHS. At Congress Heights.

The CHAIRMAN. In the city of Washington?

Mr. BURROUGHS. In the District of Columbia; yes, sir, on the other side of the hospital, about half a mile.

The CHAIRMAN. What is your occupation?

Mr. BURROUGHS. I am working now for Finley & Sons, mineral water manufacturers, at 208 Massachusetts avenue, N.E.

The CHAIRMAN. Were you ever employed in the Government Hospital for the Insane?

Mr. BURROUGHS. Yes; from October 1, 1900, to the 17th of April past—last month.

The CHAIRMAN. The 17th of April, 1906?

Mr. BURROUGHS. Yes, sir.

The CHAIRMAN. What were your duties in the hospital?

Mr. BURROUGHS. I worked there sorting soiled clothes in the basement and around the wash wheel.

The CHAIRMAN. Were you engaged all the time in the laundry department?

Mr. BURROUGHS. Yes, sir; all the while.

The CHAIRMAN. What salary did you get while you were there?

Mr. BURROUGHS. For about a year and a half, or perhaps a little over that, I received \$20 a month, and following that I got a raise of \$2.50 for the following six months. Each six months I got a two dollar and a half raise. I received two raises of \$2.50 each while I was there, and I was there about two years and a half.

The CHAIRMAN. So you got from twenty to twenty-five dollars a month?

Mr. BURROUGHS. Yes, sir.

The CHAIRMAN. Of course you were cared for there—I mean you got your board and lodging there?

Mr. BURROUGHS. Such as it was; yes, sir.

The CHAIRMAN. You lived at the institution?

Mr. BURROUGHS. Yes, sir.

The CHAIRMAN. Did you ever have the care or charge of the insane patients?

Mr. BURROUGHS. No, sir; they never came under my charge, but they worked around me.

The CHAIRMAN. They worked in the laundry, did they?

Mr. BURROUGHS. Yes, sir.

The CHAIRMAN. How many of them did you see in the laundry at work?

Mr. BURROUGHS. It varied; sometimes there were 18 or 19, and I think it ran as high as 24.

The CHAIRMAN. How many people were employed in the laundry altogether while you were there?

Mr. BURROUGHS. Between 50 and 60. I am not sure of the exact number, but I think there was between 50 and 60, male and female.

The CHAIRMAN. Who was the head of the laundry?

Mr. BURROUGHS. The foreman was Edward L. Maenche.

The CHAIRMAN. Is he still there, so far as you know?

Mr. BURROUGHS. So far as I know; yes, sir.

The CHAIRMAN. Who had direct charge of the insane people who worked in the laundry while you were there?

Mr. BURROUGHS. Different ones—Mr. McMurray, Mr. Satterfield, and Miss Dement.

The CHAIRMAN. Were they employees in the laundry?

Mr. BURROUGHS. Yes, sir.

The CHAIRMAN. Mr. Burroughs, while you were employed there in the laundry, did you ever see any improper treatment of any of the insane people?

Mr. BURROUGHS. On numerous occasions.

The CHAIRMAN. Will you name one of them?

Mr. BURROUGHS. One particular occasion was a small patient by the name of Joseph Marlin. He was a very simple-minded fellow, and he had a way of going around and picking up little ravelings or anything of that kind and throwing them down. On this occasion particularly this Mr. Satterfield jumped on him and threw him down, and was beating him. At that time Mr. Maenche walked into the room and stood watching him, and then went over to him and says: "Don't hit him any more." With that this man wheels on Mr. Maenche and says: "I didn't hit him." Mr. Maenche says: "Don't lie to me; I was standing there looking at you." With that Mr. Maenche walked over to myself and a young man by the name of Sydnor and warned us that if that happened again that he would have to carry it before the doctor; but it kept occurring.

The CHAIRMAN. You say he warned you?

Mr. BURROUGHS. No; he talked to the two of us. There were four or five of us present. It was at noon time; I suppose about twenty minutes of one.

The CHAIRMAN. About when was this?

Mr. BURROUGHS. This was in last July.

The CHAIRMAN. In July, 1905?

Mr. BURROUGHS. Yes, sir.

The CHAIRMAN. What did you mean when you said that Maenche warned you two?

Mr. BURROUGHS. He got so mad, from what I could judge, at this man lying to him, after he stood there and saw him hit the patient, that he came over and said if it happened again he would have to carry it before the doctor. There was hardly a day passed but what there was some abuse of patients in some way there by knocking them down or choking them, or something of that kind.

The CHAIRMAN. Is there any other particular case you can think of?

Mr. BURROUGHS. Yes, sir; another one was Alphonso Rollin, a German, who could understand very few words of English. At times they would give this man an order that he could not understand, I guess, and they would jump on him. In one particular case two men, Sydnor and a fellow by the name of Worrell, jumped on him and put him in the clothes bin, where they put clothes and shake out sheets to run through the mangle. Mr. Maenche was sitting on a table up against the wall watching him. So the two of them were on this patient choking him, and Mr. Maenche went over to them after he had looked on a while.

The CHAIRMAN. Who were the men that were concerned in that?

Mr. BURROUGHS. Millord Sydnor and Hezzy Worrell.

The CHAIRMAN. Is Mr. Satterfield there yet?

Mr. BURROUGHS. No, sir; from what I can understand, he was discharged last month sometime.

The CHAIRMAN. Do you know that he has been discharged?

Mr. BURROUGHS. I have heard it; yes, sir. I don't know it.

The CHAIRMAN. How about the other two?

Mr. BURROUGHS. They left. They resigned, both of them.

The CHAIRMAN. Do you know when?

Mr. BURROUGHS. One resigned last August and the other some time last year; but it was a case of resignation.

The CHAIRMAN. Were there any other particular cases that you recall?

Mr. BURROUGHS. Another case that I know of is William Crimmins. They had a way of teasing him——

The CHAIRMAN. Who had a way of teasing him?

Mr. BURROUGHS. This Mr. Satterfield. He was working these patients at the time, I think, although I am not positive about that. I think he was. He was there working them, and he was running a wash wheel. This was around noon time. They started to fight over by the wash boiler; that is, over at the end of the wash room, or by the starch boiler at least, and he fought him over against the dry room. Then he dropped down.

The CHAIRMAN. Who dropped down?

Mr. BURROUGHS. This patient. He knocked him down and was on him. I am not positive, but I think Mr. McMurray helped pull him off. I am not sure whether it was McMurray or not; but it was some of the employees of the laundry.

The CHAIRMAN. Was the foreman of the laundry there at the time?

Mr. BURROUGHS. I couldn't say. On that occasion I am not positive.

The CHAIRMAN. Do you know of any other case?

Mr. BURROUGHS. Another case was that of a patient by the name of O'Breedy. He has a way of standing with his knees bowed, and they would take these big heavy wash cars that they have to pitch white clothes out of, and would run them up behind him, and knock him flat on his shoulders back into this car. On several occasions I have seen Mr. Maenche stand by the dry room looking on. It happened so often that I have seen girls feeding mangles jump down off the platform and look on. It occurred regularly.

The CHAIRMAN. Did Mr. Maenche stop that?

Mr. BURROUGHS. No, sir.

The CHAIRMAN. Is Mr. Maenche still there?

Mr. BURROUGHS. So far as I know; yes, sir.

The CHAIRMAN. Did you ever take part in any of these things?

Mr. BURROUGHS. No, sir.

The CHAIRMAN. Did you ever attempt to interfere with the treatment of them?

Mr. BURROUGHS. No, sir; because I knew the foreman of the place was acquainted with it, and I had no right to go over his head at all, until it became so bad that I advised two different parties in the institution, and I was advised to report it to the Doctor.

The CHAIRMAN. Did you report it?

Mr. BURROUGHS. I did, sir.

The CHAIRMAN. In writing or verbally?

Mr. BURROUGHS. At first I called the attention of the Doctor to Mr. Maenche's abuse of the employees.

The CHAIRMAN. To Mr. Maenche's abuse of them?

Mr. BURROUGHS. No; I am speaking now of the first letter I wrote the Doctor. I asked him to investigate the conduct of Mr. Maenche in coming into the grounds on duty, while in an intoxicated condition, and abusing the employees. But I never heard anything from that. Then, I think, it was the 29th or the 27th of January I preferred the charges, claiming gross neglect of duty in failing to report constant beating of patients, and entering the grounds and being on duty in an intoxicated condition. Well, there was no attention paid to that. Then I went to see the Doctor and had a conversation with him, explaining this matter thoroughly.

The CHAIRMAN. When you say "the Doctor" do you mean Doctor White?

Mr. BURROUGHS. Yes, sir; Doctor White, the superintendent. I offered to send the witnesses, but there was no action taken whatever in this matter. Then I wrote the Doctor on the following Monday, the 29th of January, I think, begging an opportunity to prove these charges and protect my integrity in this matter. There was not any attention paid to this letter whatever. Then, after the Medico-Legal Society made a report, Doctor White sent for me, and when I entered the office he says: "Burroughs, what idea did you form from our last conversation?" I says: "Doctor, there was but one idea I could form, and that is, you thought I was lying and you didn't care to bother with the case." Then he said: "Have you had

any conversation with the Medico-Legal Society?" I said: "I have not had the pleasure of meeting any of the gentlemen, as I know of." Then he said: "Burroughs, I have been waiting to see you."

Mr. SMYER. He had been doing what?

Mr. BURROUGHS. He said he was waiting to hear from me. I had written two letters on this matter and also had a private conversation with him, going into the case thoroughly and explaining every matter.

The CHAIRMAN. Did he tell you to write any more letters?

Mr. BURROUGHS. No, sir; he said: "Burroughs, I couldn't give you authority to go around and take these people from their work." Well, as I told the Doctor, I had explained the matter as thoroughly as I could, and I couldn't go into the case any further. Then he says to me: "Why didn't you interfere in these cases? If you saw a child over in town with a drunken man beating him, wouldn't you interfere? I told him that those were two different cases; and that while I was in the institution I was subject to his orders and the orders of the foreman of the laundry; but that once out, I could do to suit myself.

The CHAIRMAN. Do you mean that you would have allowed an attendant to kill a patient without interfering?

Mr. BURROUGHS. Oh, no; but this was the case: The foreman of the place was there present and saw all this beating and he knew of it. From what I could judge it was allowed.

The CHAIRMAN. Did you ever have any trouble with the foreman?

Mr. BURROUGHS. Not until this case. We never had any trouble, only——

The CHAIRMAN. Did you ever go and speak with the foreman or remonstrate with him with regard to this beating?

Mr. BURROUGHS. No, sir; I never did, because he was there present when these things occurred.

The CHAIRMAN. You never told him of any case that occurred when he was not present?

Mr. BURROUGHS. No, sir; because I knew if he knew of one case he ought to report that.

The CHAIRMAN. Have you got any particular grievance against the hospital yourself?

Mr. BURROUGHS. No, sir; none whatever.

The CHAIRMAN. How did you come to leave the hospital?

Mr. BURROUGHS. I have a bad case of heart trouble, and in the wash room there was a great deal of steam that escapes and there is a great deal of dampness, and with the trouble I have it causes suffocation at times, on damp days; so I have been advised to get out. On different occasions I have been laid up and had to lay off for two or three weeks at a time.

The CHAIRMAN. How old are you?

Mr. BURROUGHS. I am 34 years old.

The CHAIRMAN. Did you voluntarily leave the hospital; did you resign?

Mr. BURROUGHS. Yes, sir; and I have a paper in my pocket from Doctor White now, if you wish to see it.

The CHAIRMAN. Did you keep copies of your letters to Doctor White?

Mr. BURROUGHS. No, sir; but I can remember them. I never kept any copies.

Mr. SMYSER. Have you got those letters that you wrote—Doctor White, have you got those letters?

Doctor WHITE. Yes, sir.

(The letters referred to were produced by Doctor White.)

Mr. SMYSER. How many letters did you write to Doctor White?

Mr. BURROUGHS. I wrote one complaining—

Mr. SMYSER. How many did you write?

Mr. BURROUGHS. I wrote three; that is, taking in the charges preferred.

The CHAIRMAN. When was the first one written?

Mr. BURROUGHS. I think it was somewhere along about the 10th of January; but I am not positive. It was in the first part of January.

The CHAIRMAN. Were all the letters that you wrote signed by you?

Mr. BURROUGHS. Yes, sir; every one of them. The first letter I wrote—

Mr. SMYSER. That answers the question.

Mr. BURROUGHS. I want to explain that I had the permission of three others to use their names, which were written on a separate slip—the names of three other parties.

The CHAIRMAN. Is this the first letter you referred to [exhibiting a letter to the witness]?

Mr. BURROUGHS. This is the first one; yes, sir.

The CHAIRMAN. Is that in your handwriting?

Mr. BURROUGHS. Yes, sir.

The CHAIRMAN. Is this the slip, to which you refer, with the names on it?

Mr. BURROUGHS. Yes, sir.

(The above-mentioned letter and slip are marked for identification "Burroughs Nos. 1 and 2.") (See page 579.)

The CHAIRMAN. Did you hear from Doctor White in response to that?

Mr. BURROUGHS. No, sir; I never did.

The CHAIRMAN. Were the names on that separate slip inclosed in the same envelope with this letter?

Mr. BURROUGHS. Yes, sir; with that first letter, when I asked him to investigate this man's conduct.

Mr. SMYSER. Your name is not attached to that letter at all, is it?

Mr. BURROUGHS. Yes, sir; you will see it, the last name there—James W. Burroughs.

Mr. SMYSER. That is your name?

Mr. BURROUGHS. Yes, sir.

The CHAIRMAN. When did you write to Doctor White again?

Mr. BURROUGHS. I think the next letter was about the 29th of January; but I am not positive about the date. The charges were before that. Then I had a private interview with him, and then I wrote him another one about the 29th of January.

The CHAIRMAN. Did you write this letter to him [exhibiting a letter to the witness]?

Mr. BURROUGHS. That is one of them; yes, sir.

(The above-mentioned letter is marked for identification "Burroughs No. 3.")

The CHAIRMAN. Is that in your handwriting?

Mr. BURROUGHS. Yes, sir; that is in my handwriting.

The CHAIRMAN. And signed by you?

Mr. BURROUGHS. Yes, sir.

The CHAIRMAN. Did you get any response to that?

Mr. BURROUGHS. No, sir.

The CHAIRMAN. Did you see Doctor White about it at that time?

Mr. BURROUGHS. Not at that time; but the following Friday I did.

(The above-mentioned letter is marked for identification "Burroughs No. 4.")

The CHAIRMAN. Now, will you look at these, please, and state whether you wrote that?

Mr. BURROUGHS. Yes; this was the last letter I wrote after having the interview with him. That was my last.

The CHAIRMAN. That is also in your handwriting and signed by you?

Mr. BURROUGHS. Yes, sir.

The CHAIRMAN. Did you have any personal interview with Doctor White after writing this letter of January 27?

Mr. BURROUGHS. Not until after the Medico-Legal Society made their report. Then I was called up by Doctor White. Previous to that letter I went to see the Doctor myself without being called.

The CHAIRMAN. What did you tell him then?

Mr. BURROUGHS. I told him about the frequent beating of patients and the intoxication.

The CHAIRMAN. Did you tell him of these occurrences you have told us of here to-day?

Mr. BURROUGHS. Yes; and I offered to produce the witnesses to prove what I said. I offered him, if I couldn't prove every word that I told him, that I would be willing to go out of the case.

The CHAIRMAN. What did the Doctor say?

Mr. BURROUGHS. At that time he didn't make any comment at all. He just seemed not to believe it.

The CHAIRMAN. What do you mean by that; do you mean that he just simply did not say anything to you?

Mr. BURROUGHS. No; not in particular. He didn't give me any satisfaction at all.

The CHAIRMAN. You do not remember anything further, as to exactly what he said?

Mr. BURROUGHS. No, sir; I could not say.

The CHAIRMAN. Did you write a letter to Doctor White again, after this?

Mr. BURROUGHS. After the 27th?

The CHAIRMAN. Yes.

Mr. BURROUGHS. I don't think I did.

The CHAIRMAN. Look at this letter and tell me whether that is yours? [Exhibiting a letter to the witness.]

Mr. BURROUGHS. Yes; that is mine. That was written after the Medico-Legal Society made its report, and after the last conversation I had with Doctor White. I sent him some witnesses then, and I heard of two others afterwards who knew of these cases, so I sent him these two names; but before that I had sent him six or seven. I forget the exact number.

The CHAIRMAN. How did you come to send him the names of those witnesses?

Mr. BURROUGHS. This was after my conversation with him.

The CHAIRMAN. You said that before this you had sent him five or six names.

Mr. BURROUGHS. Yes, sir.

The CHAIRMAN. How did you come to do that, if when you talked with him he paid no attention to it and did not ask about it?

Mr. BURROUGHS. That is an entirely different time. The time I am speaking about, when he didn't pay any attention, was right after I preferred these charges in January. This conversation was in March or about the last part of February. There were two different conversations.

The CHAIRMAN. Did he send for you the second time?

Mr. BURROUGHS. Yes, sir; after this report was made.

The CHAIRMAN. Did he tell you he wanted you to produce witnesses?

Mr. BURROUGHS. Yes; except the names. I gave him the names; but at the first conversation I offered him the witnesses and he refused to take them.

The CHAIRMAN. I want to ask you again why it was that you personally did not interfere when you saw patients being badly treated by a fellow-employee?

Mr. BURROUGHS. Simply because the foreman was present and he took no action. I had heard of such cases all through the grounds, and I thought it was permitted.

The CHAIRMAN. Even if you thought it was permitted, it would not have justified you in seeing a person seriously hurt, would it?

Mr. BURROUGHS. I was not employed as an attendant. I was employed simply to turn out clothes.

The CHAIRMAN. And consequently, if an attendant had killed a patient it was not any of your business to interfere?

Mr. BURROUGHS. Well, I won't say on that matter.

Mr. HAY. You complained to the superintendent?

Mr. BURROUGHS. Yes, sir; it became so bad and conditions got so rotten, I must say, that something had to be done.

Mr. BARCHFELD. You spoke of one boy—a feeble-minded youth.

Mr. BURROUGHS. Yes, sir.

Mr. BARCHFELD. You saw him beaten, struck, and knocked down, and you did absolutely nothing to protect him?

Mr. BURROUGHS. No, sir; because the foreman was standing right there looking on.

Mr. BARCHFELD. I would not have allowed you to have been abused in that way if I had been standing there.

Mr. BURROUGHS. If I had interfered I would have been promptly fired out of the place immediately.

Mr. BARCHFELD. That would have been more credit to you than to stand by and see this done.

Mr. BURROUGHS. I had not the right. I have always been taught, in business firms, never to go over a superior's head; and I have clung to that matter under all conditions. But I was advised by two heads of departments to report this matter to the Doctor, which I did.

Mr. HAY. What about this case of Sophronia Howard?

Mr. BURROUGHS. I have only heard of that.

Mr. HAY. You don't know anything about that yourself?

Mr. BURROUGHS. No, sir.

Mr. HAY. You say the foreman was constantly under the influence of liquor while he was on duty?

Mr. BURROUGHS. I have seen him, and I can bring two other witnesses to prove it, lying in the basement so intoxicated that these two other employees have stumbled over him in the dark room, when he is supposed to be on duty or to be absent on his month day, or something like that; but he was lying in the basement intoxicated.

Mr. HAY. When you made your report to Doctor White, did you say anything to him about the intoxication of this man?

Mr. BURROUGHS. Yes, sir.

Mr. HAY. You told him about it then?

Mr. BURROUGHS. Yes, sir.

Mr. HAY. How long ago was that?

Mr. BURROUGHS. When I told the doctor?

Mr. HAY. Yes.

Mr. BURROUGHS. It was in January.

Mr. HAY. So far as you know, this man is still on duty at the hospital?

Mr. BURROUGHS. Yes, sir; and the way it came about that I reported this matter was that this man had been getting drunk three or four times a week right along, and he came in there and would abuse the women something outrageous, calling them all kinds of names. He took three girls there in his office and kept them there two or three hours asking them questions no gentleman would ask any lady.

Mr. HAY. Were you there at the time?

Mr. BURROUGHS. I was in the laundry at the time; yes, sir.

The CHAIRMAN. Did you hear these conversations you speak of?

Mr. BURROUGHS. No, sir; I was told about them by one of the parties that was in the room at the time.

Mr. HAY. You were told about it at the time it happened?

Mr. BURROUGHS. Yes, sir.

Mr. HAY. When you made your complaint to Dr. White did you also report that?

Mr. BURROUGHS. I mentioned the fact to the doctor; yes, sir.

Mr. HAY. What was the mode by which the patients were badly treated?

Mr. BURROUGHS. At one time, as I mentioned, this Rollin was knocked down and beat with fists. Then, again, they would take these heavy cars and run up behind them and knock them back, and they would fall on their shoulders, and the chances are they would break their neck. Then, again, one patient in particular, named Michael Liston, was very excitable and would use very severe language, and they would take a towel or pillowcase and beat him over the head and get him to cursing and hollering, and then take one and put it around his neck and choke him to make him stop.

The CHAIRMAN. Tell me about that toweling; how was that done?

Mr. BURROUGHS. In this case it was just simply to take a towel or a pillowcase and put it around his neck and grab it up and twist it with one hand. This man was very excitable. His name was Michael Liston. They would hit him over the head and get him excited and then take a towel and choke him.

The CHAIRMAN. Was all this done by Mr. Satterfield?

Mr. BURROUGHS. Yes, sir; it was him in particular.

The CHAIRMAN. Did you ever have any row with Satterfield?

Mr. BURROUGHS. No; we were always on good terms until this matter came up, and then he stopped speaking to me.

The CHAIRMAN. The fact that he mistreated the patients, and the things of that kind, never interfered with the good terms you were on with him?

Mr. BURROUGHS. No, sir.

The CHAIRMAN. How did you come to talk with the gentlemen connected with the Medico-Legal Society about these things?

Mr. BURROUGHS. I never saw any of the gentlemen until about a week ago. I never knew one of them.

The CHAIRMAN. Did you not make an affidavit for them in connection with some matter?

Mr. BURROUGHS. A sworn statement? Not as I know of.

The CHAIRMAN. Did you not make some statement?

Mr. BURROUGHS. They asked me about a week ago.

The CHAIRMAN. I mean back in February.

Mr. BURROUGHS. No; I never saw one of them. I never knew their names at all. I told the doctor I was not acquainted with any of the gentlemen at all.

Mr. SMYSER. Who was the lady that told you that this man had these ladies in the room there for two or three hours and used that kind of language?

Mr. BURROUGHS. I can mention her name; but I would rather mention it in private to some of you gentlemen. I can tell the name.

Mr. SMYSER. Is she here?

Mr. BURROUGHS. She is at the laundry.

Mr. SMYSER. I mean within call.

Mr. BURROUGHS. She is over at St. Elizabeth's. It was not mentioned to me personally, but it was mentioned at the dinner table the following day when this happened.

Mr. SMYSER. Why do you hesitate to give her name; this is an important matter.

Mr. BURROUGHS. I do not hesitate. It is only on account of the lady. It doesn't make any difference to me.

Mr. SMYSER. If she was subjected to annoyances of that kind by some squirt out there I think we ought to know it.

Mr. BURROUGHS. I can give you the names of the three girls, if you wish them.

Mr. SMYSER. I think we ought to know those names.

Mr. BURROUGHS. I can give you the three names of the girls that were in that office.

Mr. HAY. Let him give the names to the chairman.

The CHAIRMAN. Write them out and give them to me, and if we want them we will subpoena them.

(The three names were thereupon written upon a separate piece of paper by the witness and handed to the chairman.)

The CHAIRMAN. Do you know anything about old soldiers who were employed in the laundry?

Mr. BURROUGHS. I don't know whether they were old soldiers or not. They simply wore a soldier's uniform, and that is as far as I know.

TESTIMONY OF SPENCER HERBERT.

SPENCER HERBERT, being first duly sworn, was examined and testified as follows:

The CHAIRMAN. What is your full name?

Mr. HERBERT. Spencer Herbert.

The CHAIRMAN. Where do you live?

Mr. HERBERT. 916 Third street SE.

The CHAIRMAN. What is your occupation?

Mr. HERBERT. I am a railroad conductor.

The CHAIRMAN. Are you a conductor now on a surface railroad here?

Mr. HERBERT. Yes, sir.

The CHAIRMAN. Were you formally an employee in the hospital?

Mr. HERBERT. Yes, sir.

The CHAIRMAN. For how long?

Mr. HERBERT. For about two years.

The CHAIRMAN. When did you begin?

Mr. HERBERT. In 1903; I think September 21st.

The CHAIRMAN. When did you leave?

Mr. HERBERT. In September, 1905; but I don't know just the date.

The CHAIRMAN. What were your duties when you were in the hospital?

Mr. HERBERT. I sorted clothes in the laundry after they were washed.

The CHAIRMAN. Were you in the laundry all the time you were there?

Mr. HERBERT. Yes, sir.

The CHAIRMAN. What pay did you receive?

Mr. HERBERT. I got from eighteen to twenty-seven and a half a month.

The CHAIRMAN. And your board and lodging, of course?

Mr. HERBERT. Yes, sir.

The CHAIRMAN. What do you know about matters that happened in Howard Hall? In the first place, where is Howard Hall; is that a part of the laundry?

Mr. HERBERT. No, sir; it was a place where they keep patients at, and they slept where they stayed during the day.

The CHAIRMAN. Is that a separate building?

Mr. HERBERT. Yes, sir.

The CHAIRMAN. Did your duties take you there constantly?

Mr. HERBERT. No, sir.

The CHAIRMAN. Were you ever there?

Mr. HERBERT. Yes, sir; I was there. I used to go there with some of the attendants. I would go through there in the afternoons.

The CHAIRMAN. What did you see in Howard Hall?

Mr. HERBERT. I have seen patients there strapped in the beds hand and foot so they couldn't move. I have seen them in what they call the tight jacket.

The CHAIRMAN. I wish you would describe one of those tight jackets; what is it made of?

Mr. HERBERT. It is made of canvas, I suppose.

The CHAIRMAN. How is it put on?

Mr. HERBERT. It was put on just like anyone would put on pants; all made together, and then they laced up in the front.

Mr. HERBERT. No, sir; they lace up in the back, I believe.

The CHAIRMAN. Was this very stiff, hard canvas?

Mr. HERBERT. Yes, sir; very stiff.

The CHAIRMAN. Could a person walk after they got one of these things on?

Mr. HERBERT. Yes, sir; they could walk.

The CHAIRMAN. Could they use their arms freely?

Mr. HERBERT. No, sir.

The CHAIRMAN. Why not?

Mr. HERBERT. On lots of them the hands were sewed up so they couldn't get their hands out—the same as if they had muffs on.

The CHAIRMAN. That is not to prevent the use of the arms at all?

Mr. HERBERT. They could use their arms; but still they couldn't use their hands you see.

Mr. SMYSER. Was their anything to interfere with the free movement of the arms?

Mr. HERBERT. No, sir.

Mr. SMYSER. But they could not grab anything with their hands?

Mr. HERBERT. No, sir.

Mr. SMYSER. Was there any reason for that?

Mr. HERBERT. I don't know whether there was any reason or not. I don't know what they were put on there for, unless they were disorderly or something; and that is the only way they can attend to them. I don't know what they were put on there for, because I never asked the question.

Mr. HAY. Were those jackets painful?

Mr. HERBERT. No, sir; they were not painful.

The CHAIRMAN. Now, then, tell us about the patients you saw strapped in the beds. Was that also in Howard Hall?

Mr. HERBERT. Yes, sir.

The CHAIRMAN. How many patients did you ever see strapped in bed there?

Mr. HERBERT. I only saw one.

The CHAIRMAN. How was he strapped?

Mr. HERBERT. He was strapped down hand and foot.

The CHAIRMAN. Do you mean to say he was actually held tight on the bed?

Mr. HERBERT. He was held right tight; yes, sir.

The CHAIRMAN. Did he look as though he was suffering?

Mr. HERBERT. Yes, sir; because he tried to get away.

The CHAIRMAN. Have you any idea why he was strapped there?

Mr. HERBERT. No, sir.

The CHAIRMAN. Do you know whether he was a very dangerous patient?

Mr. HERBERT. I suppose he was dangerous, and that was the reason they strapped him there.

Mr. CHAIRMAN. Now about handcuffs. Where did you ever see any handcuffs?

Mr. HERBERT. I saw a colored fellow, when they used to take him out for a walk they used to put handcuffs on his hands.

The CHAIRMAN. What were those handcuffs made of?

Mr. HERBERT. Leather; nothing but leather straps.

The CHAIRMAN. Was there not a long strap between the two wristlets?

Mr. HERBERT. No, sir; it was about that long [indicating].

The CHAIRMAN. You don't know what that was done for?

Mr. HERBERT. I heard some of them say that he was strapped to keep him from running away; that he would run away if they didn't strap his hands—that he would try to get away; that is, when he went out walking.

The CHAIRMAN. His feet were not fastened in any way?

Mr. HERBERT. No; his feet were all right.

The CHAIRMAN. He was walking around in the yard on the outside.

Mr. HERBERT. It was only when they took him out to walk.

The CHAIRMAN. That is the only time they put these straps on?

Mr. HERBERT. Yes, sir; that is the only time I ever saw it.

The CHAIRMAN. Then you don't know whether this particular patient was a dangerous man or not?

Mr. HERBERT. No, sir; I do not.

Mr. BARCHFELD. How many men did you see with handcuffs on?

Mr. HERBERT. Only one.

Mr. BARCHFELD. And you saw one man in bed?

Mr. HERBERT. Yes, sir.

Mr. BARCHFELD. He was tied hand and foot?

Mr. HERBERT. Yes, sir.

Mr. BARCHFELD. How were his feet tied?

Mr. HERBERT. They were strapped right down to the bed, you know.

Mr. BARCHFELD. Were they strapped singly or doubly?

Mr. HERBERT. They were strapped singly.

Mr. BARCHFELD. Were they strapped to the corner of the bedpost?

Mr. HERBERT. To the corner of the bed.

Mr. BARCHFELD. Can you show me how that was done?

Mr. HERBERT. They would take a strap made of a kind of canvas and they would strap it right to his feet and strap him right down to the bed, and his arms were strapped right down. Of course I don't know how long they would keep them that way; but it was just that way when I was there. I saw the fellow lying there, and I never asked any questions about it.

Mr. BARCHFELD. Was there any sort of a bandage around his limbs or feet or anywhere?

Mr. HERBERT. No, sir.

Mr. BARCHFELD. In other words, you simply mean to say that there was something to hold the man's feet and legs?

Mr. HERBERT. Yes, sir.

Mr. BARCHFELD. In a horizontal position, and he was tied there without being fastened on each side to the bed; is that it?

Mr. HERBERT. Yes, sir.

Mr. BARCHFELD. His legs were free to move? They were not under restraint, were they?

Mr. HERBERT. No, sir; they were free to move under it.

Mr. BARCHFELD. How about his arms?

Mr. HERBERT. His arms are just the same; but he couldn't get his arms out of there.

Mr. BARCHFELD. They were under this same restraint?

Mr. HERBERT. Yes, sir.

Mr. BARCHFELD. He could move under this thing?

Mr. HERBERT. Yes, sir.

Mr. BARCHFELD. Do you know what a camisole is?

Mr. HERBERT. No, sir.

The CHAIRMAN. Was Mr. Maenche the foreman all the time you were there?

Mr. HERBERT. Yes, sir.

The CHAIRMAN. Did you ever see him drunk?

Mr. HERBERT. I saw him intoxicated in the grounds when he was not on duty.

The CHAIRMAN. You never saw him drunk on duty?

Mr. HERBERT. No, sir.

The CHAIRMAN. You have seen him intoxicated on the grounds?

Mr. HERBERT. Yes, sir; when he would come in; but not frequently.

The CHAIRMAN. How often?

Mr. HERBERT. I just saw him once.

The CHAIRMAN. You only saw him once?

Mr. HERBERT. Yes, sir.

The CHAIRMAN. But you never saw him intoxicated on duty?

Mr. HERBERT. No, sir.

The CHAIRMAN. You saw him constantly, did you not?

Mr. HERBERT. Yes, sir; I saw him.

The CHAIRMAN. Did you ever see any ill-treatment of patients by any of your fellow employees?

Mr. HERBERT. Yes, sir; I have seen the same that Mr. Burroughs has just stated.

The CHAIRMAN. Do you mean to say that you saw every single one?

Mr. HERBERT. I don't say I have seen every single one; but I have seen some of them.

The CHAIRMAN. Did you ever try to interfere?

Mr. HERBERT. No, sir.

The CHAIRMAN. Why not?

Mr. HERBERT. I have never had a way of bothering with patients. I always attended to my duties and didn't interfere with anybody.

The CHAIRMAN. Were you a friend of Satterfield?

Mr. HERBERT. No, sir; no more than usual. I was friendly and sociable with everybody.

The CHAIRMAN. Did you ever tell Doctor White about this ill-treatment of patients?

Mr. HERBERT. No, sir.

The CHAIRMAN. Why not?

Mr. HERBERT. Well, I generally don't report anything.

The CHAIRMAN. I don't suppose you ever maltreated the patients yourself?

Mr. HERBERT. No, sir.

The CHAIRMAN. You never hit one of them?

Mr. HERBERT. No, sir; I never hit one.

Mr. HAY. Were you discharged?

Mr. HERBERT. No, sir; I resigned.

The CHAIRMAN. What is this toweling they have been talking about here; what does that mean?

Mr. HERBERT. I suppose that means to take a towel and put it around their neck and wring them out. I saw a fellow there at P street choke a colored fellow over there for very near half an hour.

The CHAIRMAN. On P street?

Mr. HERBERT. At the P Building.

The CHAIRMAN. Who was it did the choking?

Mr. HERBERT. Well, I wouldn't like to tell the fellow's name.

Mr. HAY. Was he an attendant?

Mr. HERBERT. Yes, sir.

The CHAIRMAN. What is his name?

Mr. HERBERT. Well, I don't want to tell his name.

Mr. SMYSER. You are safe.

The CHAIRMAN. You tell his name.

Mr. HERBERT. I would rather not tell his name.

The CHAIRMAN. Is the man still in the hospital?

Mr. HERBERT. Yes, sir.

The CHAIRMAN. Let us have his name; that is all the more reason for having it.

Mr. HERBERT. It is a fellow named De Sales Lyon.

The CHAIRMAN. How many times did you see this done?

Mr. HERBERT. Only once.

The CHAIRMAN. You never made any complaint about it?

Mr. HERBERT. No, sir.

The CHAIRMAN. You never tried to interfere about it?

Mr. HERBERT. No, sir.

The CHAIRMAN. What is meant by "wringing out" a patient?

Mr. HERBERT. Choking him.

The CHAIRMAN. Is that the same thing as choking?

Mr. HERBERT. Yes, sir.

The CHAIRMAN. You only saw that done once?

Mr. HERBERT. Yes, sir.

The CHAIRMAN. Do you know the name of the patient that was done to by this man Lyon?

Mr. HERBERT. No, sir; I do not.

The CHAIRMAN. It was a man, was it not?

Mr. HERBERT. Yes, sir; it was a man.

Mr. BARCHFELD. White or black?

Mr. HERBERT. Black.

Mr. BARCHFELD. Did you ever see any other cruelty in the laundry while you were there in the hospital?

Mr. HERBERT. Down in the laundry I saw them mistreat patients.

Mr. BARCHFELD. How many times did you see them mistreat them in the laundry?

Mr. HERBERT. That was very often; most every day you would see them run the cars up behind them, or something like that, and throw them down in the cars.

The CHAIRMAN. Did the patients themselves ever push those cars?

Mr. HERBERT. Yes, sir.

The CHAIRMAN. Did they not do it almost all the time; are not the patients the ones whose duty it was to push those cars?

Mr. HERBERT. Yes, sir.

The CHAIRMAN. Then when you say you have seen this done there, it may have been done by another patient?

Mr. HERBERT. No, sir.

The CHAIRMAN. You never took any notice of that, to see whether it was done by another patient or not?

Mr. HERBERT. I never saw it done by another patient.

Mr. SMYSER. By whom did you see it done?

Mr. HERBERT. I seen a fellow named Millard Sydnor.

The CHAIRMAN. Was he an employee?

Mr. HERBERT. Yes, sir.

The CHAIRMAN. He was one of the attendants in the laundry?

Mr. HERBERT. One of the employees in the laundry.

The CHAIRMAN. How many times did you see him do that?

Mr. HERBERT. I don't know just how many times. I have seen him do it several times. I have seen Satterfield do it, too.

The CHAIRMAN. At these times you speak of, was it done purposely by these men who were pushing the cars?

Mr. HERBERT. Yes, sir.

The CHAIRMAN. You never saw it done accidentally, I suppose?

Mr. HERBERT. No, sir.

The CHAIRMAN. And you never saw it done by a patient?

Mr. HERBERT. No, sir.

The CHAIRMAN. You never saw it done by one patient to another?

Mr. HERBERT. No, sir.

The CHAIRMAN. Did you ever do it yourself?

Mr. HERBERT. No, sir.

The CHAIRMAN. Who asked you to come here and make these affidavits?

Mr. HERBERT. Dr. Emmons.

Mr. HAY. You say you were there two years, and employed in the same place all the time?

Mr. HERBERT. Yes, sir.

Mr. HAY. And you did not see this man in charge of the laundry drunk, except on the occasion you speak of?

Mr. HERBERT. Yes, sir.

Mr. HAY. That is the only time you saw him drunk?

Mr. HERBERT. Yes, sir.

The CHAIRMAN. You only saw one patient in a strait-jacket?

Mr. HERBERT. That is all.

The CHAIRMAN. And you only saw one patient strapped in bed?

Mr. HERBERT. That is all, sir.

Mr. BARCHFELD. The one in the strait-jacket and the one strapped in bed was on the same occasion?

The CHAIRMAN. Is that so?

Mr. HERBERT. No.

The CHAIRMAN. This strait-jacket case was one case separately?

Mr. HERBERT. Yes, sir.

Mr. BARCHFELD. You described a man who had wristlets on.

Mr. HERBERT. That was the man who was taken out on the grounds to walk around.

Mr. BARCHFELD. The man in the strait-jacket could walk around?

Mr. HERBERT. Yes, sir.

Mr. BARCHFELD. He was walking around when you saw him?

Mr. HERBERT. Yes, sir.

Mr. SMYSER. When was it that you saw Lyon toweling this patient?

Mr. HERBERT. I think it was about July.

Mr. SMYSER. What year?

Mr. HERBERT. Of 1905.

Mr. SMYSER. At what time did you go to work there in the morning?

Mr. HERBERT. At 7 o'clock.

Mr. SMYSER. What were your hours?

Mr. HERBERT. Eight hours a day.

Mr. SMYSER. At what time did Maenche go to work—what were his hours?

Mr. HERBERT. Sometimes he was down there at 7 o'clock and sometimes he was down there at 9 o'clock.

Mr. SMYSER. Do you know what his hours were?

Mr. HERBERT. No, sir; I do not.

Mr. SMYSER. Would he be around there during the day much of the time or a little of the time?

Mr. HERBERT. Sometimes he was around there all the time, and then again I have seen him when he was not there. Of course I don't know whether it was his day off or not.

Mr. SMYSER. You mean you did not see him there?

Mr. HERBERT. No, sir.

Mr. SMYSER. Take an average day, and how much time would Maenche be there?

Mr. HERBERT. Well, he was there very frequently.

Mr. SMYSER. From morning till evening what would it average, six or eight hours?

Mr. HERBERT. Yes, sir.

Mr. SMYSER. More than that?

Mr. HERBERT. No; I don't know as it was more than that, but it would average that; yes, sir.

Mr. SMYSER. You saw him daily?

Mr. HERBERT. Yes, sir; I didn't see him every day because he was not there every day.

Mr. HAY. Did you ever see any of these so-called strait-jackets in the laundry?

Mr. HERBERT. Yes, sir.

Mr. HAY. How many of them?

Mr. HERBERT. I have seen lots of them. There were always five or six down every week.

The CHAIRMAN. Were those like the one you spoke of as having been on this man?

Mr. HERBERT. Yes, sir; but I have seen them different. Some of them are sewed up at the hands and some of them are open at the hands.

The CHAIRMAN. Were not these what they call camisoles?

Mr. HERBERT. I don't know, sir.

The CHAIRMAN. Did you ever hear that word?

Mr. HERBERT. No, sir.

The CHAIRMAN. Were they made of canvas?

Mr. HERBERT. Yes, sir.

The CHAIRMAN. They were not made of leather?

Mr. HERBERT. No, sir.

The CHAIRMAN. They were made of canvas and they laced up behind?

Mr. HERBERT. Yes, sir.

The CHAIRMAN. Did all of them have legs attached to the body?

Mr. HERBERT. Yes, sir.

The CHAIRMAN. Did you never see them cut off, like a jacket?

Mr. HERBERT. No, sir.

The CHAIRMAN. You made an affidavit in this matter at the request of Dr. Emmons; did you not?

Mr. HERBERT. Yes, sir.

The CHAIRMAN. Did you read that affidavit over before you signed it?

Mr. HERBERT. Yes, sir.

The CHAIRMAN. The testimony you have given here to-day is true, is it not?

Mr. HERBERT. Yes, sir; it is.

The CHAIRMAN. When you said that you never saw but one person with a strait-jacket on you meant what you said?

Mr. HERBERT. Yes, sir.

The CHAIRMAN. When you said you only saw one man strapped in bed, you meant what you said?

Mr. HERBERT. Yes, sir.

The CHAIRMAN. Then, in your affidavit, how did you come to swear that you saw two patients with strait-jackets on at one time; and that you saw patients strapped in beds? Which is true, your affidavit or your testimony now?

Mr. HERBERT. I didn't say patients. I said a patient strapped in bed.

The CHAIRMAN. There never was but one case of one patient strapped in bed.

Mr. HERBERT. There was something that I left out, about a case over in Home 1. There was a patient there in a strait-jacket.

Mr. SMYSER. What were these strait-jackets in the laundry for?

Mr. HERBERT. They were down there to be washed and laundered.

Mr. SMYSER. Then they are made of a material that can be washed; is that it?

Mr. HERBERT. Yes, sir.

Mr. SMYSER. And they were washed?

Mr. HERBERT. Yes, sir.

The CHAIRMAN. They were washed with the other clothes; were they not?

Mr. HERBERT. Yes, sir.

The CHAIRMAN. They were washed with the sheets and everything else?

Mr. HERBERT. They were washed separately from the sheets; but they were washed with the clothes of the patients.

TESTIMONY OF THOMAS L. McMURRAY.

THOMAS L. McMURRAY, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Give your full name and address.

Mr. McMURRAY. T. L. McMurray, No. 515 Fifth street SE.

The CHAIRMAN. What is your present occupation?

Mr. McMURRAY. The laundry business.

The CHAIRMAN. Here in the city of Washington?

Mr. McMURRAY. Yes, sir; in the city.

The CHAIRMAN. You were employed in the laundry of the hospital, were you not?

Mr. McMURRAY. Yes, sir.

The CHAIRMAN. When did you go there, and when did you leave?

Mr. McMURRAY. I went there September 22, 1901, and was discharged the 22d of January, 1906.

The CHAIRMAN. What do you know about a patient by the name of O'Breedy?

Mr. McMURRAY. He worked in the laundry unloading extractors most of the time I was there.

The CHAIRMAN. Was he a patient?

Mr. McMURRAY. Yes, sir.

The CHAIRMAN. Did you ever see him badly treated?

Mr. McMURRAY. Yes, sir.

The CHAIRMAN. By whom?

Mr. McMURRAY. By Millard Sydnor, mostly.

The CHAIRMAN. What was done to him?

Mr. McMURRAY. He was cuffed and knocked around and knocked into the cars, the same as Mr. Spencer Herbert stated. In fact I saw all those cases Mr. Burroughs spoke of, except that of Marlin. I was down in an angle of the room and didn't see that.

The CHAIRMAN. Were any of them badly hurt?

Mr. McMURRAY. No, sir.

The CHAIRMAN. Did you ever interfere with the bad treatment of these men?

Mr. McMURRAY. Not while he had charge of the patients. I had charge of them myself for a good while.

The CHAIRMAN. Were they badly treated then?

Mr. McMURRAY. No, sir.

The CHAIRMAN. Did you ever hit a patient?

Mr. McMURRAY. Nobody ever knew me to hit a patient.

The CHAIRMAN. When did you have charge of the patients?

Mr. McMURRAY. I had charge of them the last year before I left there.

The CHAIRMAN. Did you ever see this Satterfield do anything to the patients?

Mr. McMURRAY. Yes, sir.

The CHAIRMAN. What was the case of Alphonso Rollin?

Mr. McMURRAY. I have seen him cuffed and choked and kicked and knocked around.

The CHAIRMAN. What do you mean by choked?

Mr. McMURRAY. Caught by the throat with the hand and choked.

The CHAIRMAN. How about Joe Marlin?

Mr. McMURRAY. I didn't see that case of Joseph Marlin. I heard of it; but I didn't see it.

The CHAIRMAN. Tell me a little more about that you saw Satterfield do to Rollin.

Mr. McMURRAY. He was always after him, because he was a Dutchman and couldn't understand what he said. He would tease him and get him mad and choke him because he would get mad.

The CHAIRMAN. Did that frequently happen?

Mr. McMURRAY. Yes, sir; and it was the same thing with Mike Liston.

The CHAIRMAN. I want to get through with this Rollin case first. How often did you see him choke him?

Mr. McMURRAY. I couldn't tell you the exact number of times—but a number of times.

The CHAIRMAN. Do you mean to say that he used both hands to choke him, so that he couldn't get his breath?

Mr. McMURRAY. No; he wouldn't do that. He would just catch him by the throat and shove him around.

The CHAIRMAN. It did not last any length of time?

Mr. McMURRAY. No.

The CHAIRMAN. Did you ever see him knock him down?

Mr. McMURRAY. Once I seen him knock him down. I seen him hit him once and knock him down.

The CHAIRMAN. And you never interfered at all?

Mr. McMURRAY. No, sir; I didn't have charge of the place then.

The CHAIRMAN. Did you ever tell the foreman of that occurrence?

Mr. McMURRAY. No, sir.

The CHAIRMAN. Did you ever remonstrate with the foreman?

Mr. McMURRAY. I didn't see that it was of any use to. He seen it done often enough.

The CHAIRMAN. You never did?

Mr. McMURRAY. No, sir.

The CHAIRMAN. Did the foreman ever reprimand an employee for beating or hitting a patient?

Mr. McMURRAY. He would go around and tell him that if it ever occurred again he would be fired, or something of that kind; but yet he would stay there.

The CHAIRMAN. What is that?

Mr. McMURRAY. I have heard him go around to different employees and tell them if they abused the patients he would have them discharged.

Mr. SMYSER. Who said that?

Mr. McMURRAY. The foreman of the laundry, Mr. Maenche. He knows of a number of cases that he didn't report.

The CHAIRMAN. You know of a number of cases that you didn't report?

Mr. McMURRAY. Yes, sir.

The CHAIRMAN. You did not think it was your duty to report it?

Mr. McMURRAY. No, sir; it was not my duty at all.

The CHAIRMAN. Did you ever see Maenche drunk?

Mr. McMURRAY. Yes, sir.

The CHAIRMAN. While on duty?

Mr. McMURRAY. Yes, sir.

The CHAIRMAN. Many times?

Mr. McMURRAY. Yes, sir; I can say that I seen him drunk, or getting over the effects of a drunk, so that he wasn't fit to attend to business.

The CHAIRMAN. Was he able to go to his business?

Mr. McMURRAY. No, sir; would be laying down in the cellar asleep if he was there.

The CHAIRMAN. How many times did you see him laying down in the cellar asleep?

Mr. McMURRAY. Possibly a dozen times.

The CHAIRMAN. Do not state possibly a dozen times; it is a very serious charge.

Mr. McMURRAY. Well, I will say 10 times; I am sure of that.

The CHAIRMAN. This was during the working day?

Mr. McMURRAY. During the working hours of the day.

The CHAIRMAN. During the five years that you were there?

Mr. McMURRAY. During the four years and four months I was there.

Mr. BARCHFELD. How drunk was he on these particular occasions?

Mr. McMURRAY. He would go down stairs and go in a dark room in the cellar.

The CHAIRMAN. You saw him there 10 times?

Mr. McMURRAY. I saw him 10 times at least.

Mr. BARCHFELD. Burroughs testified that he saw him there twice drunk.

Mr. McMURRAY. I had more occasions to go to him than Burroughs did when he was there, because when he was in this condition I would run the place for him. I would come down there to find him and he would tell me not to tell anybody where he was. Two of the men who worked in the cellar can testify to the same thing.

The CHAIRMAN. So that he was not so drunk that he could not talk to you and give you instructions?

Mr. McMURRAY. Yes; he could talk, but he didn't give any orders around the place.

Mr. HAY. Who were the two men you referred to?

Mr. McMURRAY. Louis Taylor and Will Tyler.

Mr. HAY. Are they there now?

Mr. McMURRAY. Yes, sir; they are at the asylum—employed there.

The CHAIRMAN. You were discharged, were you not?

Mr. McMURRAY. Yes, sir.

The CHAIRMAN. Why were you discharged?

Mr. McMURRAY. I had about seven charges put against me. Mr. Maenche preferred charges against me.

The CHAIRMAN. What were the charges?

Mr. McMURRAY. I don't remember them all just now, but five of them were ignored altogether. The ones that they claimed I was discharged on, as Doctor White claims, were that he discharged me for an act with intent to strike a patient, and for the excessive use of material.

The CHAIRMAN. The excessive use of what?

Mr. McMURRAY. The excessive use of material; and I had no occasion to use any material for the last year and four months.

Mr. SMYSER. Did you say that one of the charges upon which you were dismissed was an attempt on your part to strike a patient?

Mr. McMURRAY. An act with intent to strike a patient is the way the charge reads. It didn't say I struck him. It was just an act, with the intent to strike him, and I was discharged for that.

Mr. SMYSER. Was there an investigation?

Mr. McMURRAY. A kind of a one.

Mr. SMYSER. You were not guilty of that?

Mr. McMURRAY. They proved it, they say.

Mr. SMYSER. They did?

Mr. McMURRAY. Yes; they claim they did. That is what I was discharged for.

Mr. SMYSER. What was your position when you threatened to strike a patient, which subsequently resulted in your removal?

Mr. McMURRAY. I had charge of the patients at that time.

Mr. SMYSER. I understood you to say that you heard Maenche say to the attendants there that if they indulged in violence or abuse to any of the patients they would be discharged?

Mr. McMURRAY. I certainly did tell you so; yes, sir.

Mr. SMYSER. You heard that?

Mr. McMURRAY. No, I didn't hear it. He never came to me and told me that.

Mr. SMYSER. You heard him say it?

Mr. McMURRAY. I heard of him telling others; but he never told it to me.

Mr. SMYSER. Did you hear him give utterance to that expression?

Mr. McMURRAY. Not personally; no, sir.

Mr. SMYSER. It was known among the employees that Maenche had reprimanded and threatened to discharge them if there was a repetition of the conduct toward the patients?

Mr. McMURRAY. Yes; he said that, but yet it still went on and he knew it.

Mr. SMYSER. It did not go on with you; did it?

Mr. McMURRAY. I didn't have any occasion to use it.

Mr. SMYSER. Because you finally got out?

Mr. McMURRAY. Yes; I didn't have it long, because I didn't do enough of it.

Mr. SMYSER. I want to ask about one other thing, about Rollin, who was choked.

Mr. McMURRAY. He is a German and can't understand English very much.

Mr. SMYSER. Who choked him?

Mr. McMURRAY. Satterfield choked him when I seen it.

Mr. SMYSER. What was Rollin doing?

Mr. McMURRAY. The first I seen of it he had him on the floor.

Mr. SMYSER. Then you did not see the beginning of the trouble?

Mr. McMURRAY. No, sir; I did not, in the Rollin case.

Mr. SMYSER. When Satterfield had Rollin on the floor, you first saw it?

Mr. McMURRAY. Yes, sir.

Mr. SMYSER. How long did he keep him on the floor?

Mr. McMURRAY. Just for a minute—not a minute.

Mr. SMYSER. What did he do with him on the floor?

Mr. McMURRAY. He choked him, and then when he got up he cuffed him a little bit and let him go sit down.

Mr. SMYSER. How long did that fracas last?

Mr. McMURRAY. None of these fracascs lasted very long.

Mr. SMYSER. I am talking about this one time.

Mr. McMURRAY. About half a minute, maybe, altogether, what I seen of it. I don't know how much longer it had been going on.

Mr. SMYSER. Did Rollin make any complaint?

Mr. McMURRAY. He didn't know enough to make a complaint. He was a crazy man.

Mr. SMYSER. If he had done anything that required interference of any kind, you did not know about it?

Mr. McMURRAY. No, sir; not in that case.

Mr. SMYSER. All you pretend to say is that you saw him on the floor?

Mr. McMURRAY. Yes, sir.

Mr. SMYSER. And he choked him, but that only lasted——

Mr. McMURRAY. For a short time.

Mr. SMYSER. Then he got up?

Mr. McMURRAY. Yes, sir.

Mr. SMYSER. When he got up did he hit him?

Mr. McMURRAY. He cuffed him—just smacked him.

Mr. SMYSER. I don't know what cuffed or smacked means. You might smack a fellow a pretty good lick, and it might be very gentle.

Mr. McMURRAY. He didn't hurt him very bad. He didn't knock him down or anything of that kind.

Mr. SMYSER. How did he smack him?

Mr. McMURRAY. Right with the open hand.

Mr. SMYSER. Where?

Mr. McMURRAY. Right across the back of the head.

Mr. SMYSER. Was it a severe blow?

Mr. McMURRAY. Just a slap—a smack.

Mr. SMYSER. With a wide-open hand?

Mr. McMURRAY. With an open hand.

Mr. SMYSER. Did it hurt him?

Mr. McMURRAY. I don't know.

Mr. SMYSER. From what you could see, did it hurt him?

Mr. McMURRAY. I should imagine it stung him a little bit; yes.

Mr. SMYSER. That was all that occurred after he got up?

Mr. McMURRAY. That was all.

Mr. SMYSER. Do you know whether he knocked him down?

Mr. McMURRAY. No, sir; I said I didn't see that part of it. When I first seen him he was down on the floor.

Mr. SMYSER. Did you see him choke him?

Mr. McMURRAY. Yes; I saw him choke him when he had him on the floor. That was the first I seen of it.

Mr. SMYSER. Did he leave any marks on him?

Mr. McMURRAY. I didn't examine him.

Mr. SMYSER. Had this man Rollin intelligence enough to talk about the occurrence?

Mr. McMURRAY. No; I don't think he had.

Mr. SMYSER. Could he appreciate what took place there, or do you know?

Mr. McMURRAY. No; I don't think he could. He was very far gone—very far gone. He was pretty bad off. He didn't know what he was talking about half the time himself. He would mutter and talk about things, but nobody could understand him.

Mr. SMYSER. Was he employed about the laundry?

Mr. McMURRAY. No; he was a patient.

Mr. SMYSER. How did he happen to be in the laundry?

Mr. McMURRAY. They worked the patients down there.

Mr. SMYSER. Was he working there?

Mr. McMURRAY. Yes, sir.

Mr. SMYSER. What was he doing?

Mr. McMURRAY. Shaking out sheets that day, I think.

Mr. SMYSER. Had he intelligence enough to do his work?

Mr. McMURRAY. Yes, sir.

The CHAIRMAN. I want to ask some questions about the machinery there. You said something about some unnecessary machinery being purchased, did you not?

Mr. McMURRAY. Yes, sir.

The CHAIRMAN. What do you know about that?

Mr. McMURRAY. Do you want me to tell all I know about it?

The CHAIRMAN. Yes.

Mr. McMURRAY. We have nine wash wheels over there in that laundry. Four of these wash wheels get through with their work usually at Wednesday noon, and they lie idle the balance of the day on Wednesday. By Thursday noon they are always through, and they lie idle all Thursday afternoon and start up Friday morning, possibly about 8 o'clock. These wheels are supposed to be in operation all the time, but they have lost an average of an hour or an hour and fifteen minutes a day in eight hours; and yet in this appropriation they got the money to buy four more new wash wheels for the same kind of work.

The CHAIRMAN. There is nothing the matter with the machinery, but you think they have got too much of it?

Mr. McMURRAY. Too much of it. They had plenty there to do the work before.

The CHAIRMAN. Are you an expert in these matters?

Mr. McMURRAY. Yes, sir; I think I am. I taught the man who runs that laundry how to run some of the machines in it.

Mr. HAY. Did Doctor White, the superintendent, come down and overlook the part of the work you were on while you were there?

Mr. McMURRAY. I have seen him there a couple of times, to the best of my knowledge.

Mr. HAY. How often?

Mr. McMURRAY. About two or three times, as a limit.

Mr. HAY. Did he ever come there?

Mr. McMURRAY. For a very short space of time. He was in and out, and that is about all there was to it.

The CHAIRMAN. You made affidavit in this matter?

Mr. McMURRAY. Yes, sir.

The CHAIRMAN. Who asked you to make it?

Mr. McMURRAY. Doctor Emmons.

The CHAIRMAN. Where was the affidavit prepared?

Mr. McMURRAY. In his office?

The CHAIRMAN. By whom?

Mr. McMURRAY. By myself. I dictated it to him and he wrote it out.

The CHAIRMAN. You dictated it to him?

Mr. McMURRAY. I told him what to write and he wrote it.

The CHAIRMAN. After it had been written out did you read it over?

Mr. McMURRAY. Certainly I read it over before I swore to it.

Mr. BARCHFELD. From the testimony of the witnesses we have heard this morning, it was a sort of custom among the employees to gibe at and have a pretty good time with these unfortunate patients, was it not?

Mr. McMURRAY. Yes, sir; it was.

Mr. BARCHFELD. A regular custom among the employees?

Mr. McMURRAY. Among some of the employees.

Mr. BARCHFELD. To have a good time—

Mr. McMURRAY. Not all of them, but some of them.

Mr. BARCHFELD. They take advantage of these poor deluded, unfortunate mortals, bereft of reason, and cuff them, choke them,

knock them down, shove cars up against them, and tease them in general?

Mr. McMURRAY. They tease them until they get mad, and then cuff them for getting mad. I have seen that many a time.

Mr. BARCHFELD. You have seen them tease them many a time?

Mr. McMURRAY. Tease them and get them mad, and then cuff them because they got mad.

Mr. BARCHFELD. That was done by the employees?

Mr. McMURRAY. That was done by employees.

Mr. BARCHFELD. It was never done in the presence of the foreman of the laundry, was it?

Mr. McMURRAY. I think it has been.

Mr. BARCHFELD. It was?

Mr. McMURRAY. Yes.

Mr. BARCHFELD. Did you so testify?

Mr. McMURRAY. Yes; I can, on some occasions.

Mr. BARCHFELD. I ask you, did you testify to that effect?

Mr. McMURRAY. No; I did not. I was not asked that question.

Mr. BARCHFELD. You never saw it done in the presence of Doctor White, did you?

Mr. McMURRAY. Oh, no.

TESTIMONY OF MISS GRACE TIPPETT.

Miss GRACE TIPPETT, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. Are you employed in the Government Hospital for the Insane now?

Miss TIPPETT. I am.

The CHAIRMAN. How long have you been so employed?

Miss TIPPETT. Since September 1, 1903.

The CHAIRMAN. In what part of the institution; in the laundry?

Miss TIPPETT. In the laundry, yes.

The CHAIRMAN. And you see the attendants and the patients there?

Miss TIPPETT. Yes, sir.

The CHAIRMAN. When I say patients, I mean you do not see any patients except those who work in the laundry?

Miss TIPPETT. No, sir.

The CHAIRMAN. Your duties are merely in the laundry, and, with the exception of that and the quarters where you sleep, you do not know anything about any of the patients?

Miss TIPPETT. No, sir.

The CHAIRMAN. Have you ever seen any of the attendants cruelly treat patients there?

Miss TIPPETT. I have.

The CHAIRMAN. Frequently?

Miss TIPPETT. Well, yes; several times, I have.

The CHAIRMAN. What have you seen them do to these patients?

Miss TIPPETT. On one occasion I saw Mr. Satterfield throw a patient down and choke him. He had his hand on his throat choking him when I seen him.

The CHAIRMAN. Had the patient been doing anything?

Miss TIPPETT. He had him down when I came in.

The CHAIRMAN. You did not see the patient knocked down?

Miss TIPPETT. No, sir.

The CHAIRMAN. And you do not know what preceded it?

Miss TIPPETT. No, sir.

The CHAIRMAN. Did it last long?

Miss TIPPETT. It lasted about two minutes, I would suppose.

The CHAIRMAN. Who was the patient?

Miss TIPPETT. Tim Carter his name was. He was a parole patient.

The CHAIRMAN. What is the name?

Miss TIPPETT. Timothy Carter.

The CHAIRMAN. Was he employed in the laundry, this Carter?

Miss TIPPETT. Yes.

The CHAIRMAN. Was he working there?

Miss TIPPETT. He was employed in the dining hall there, I think; but when he didn't have to work in the dining hall he would come to the laundry and fold towels and such as that.

The CHAIRMAN. Was he a harmless man?

Miss TIPPETT. Yes; he was harmless.

The CHAIRMAN. But you do not know anything about the cause of this fight?

Miss TIPPETT. No; I do not.

The CHAIRMAN. Did you ever see any other instances where people have been cruel to patients?

Miss TIPPETT. I have seen them put heavy loads on them and push them and make them carry it, and such as that.

The CHAIRMAN. Who did it; Satterfield?

Miss TIPPETT. Satterfield did it.

The CHAIRMAN. Did you ever see any of the rest of them do it?

Miss TIPPETT. No; I never did.

The CHAIRMAN. Did you know the three men who have given testimony this morning? Did you know Mr. McMurray?

Miss TIPPETT. Yes, sir.

The CHAIRMAN. Was he employed in the laundry when you were there?

Miss TIPPETT. He was.

The CHAIRMAN. Did you ever see him do anything to any of the patients?

Miss TIPPETT. I never did.

The CHAIRMAN. Are there any other instances that you know of, personally?

Miss TIPPETT. No; no others.

The CHAIRMAN. Any that you think of?

Miss TIPPETT. None that I can think of.

The CHAIRMAN. Did you ever see Mr. Maenche, the foreman, re-proving any of the attendants for being cruel to patients?

Miss TIPPETT. No; I did not.

The CHAIRMAN. You never made an affidavit in this matter, did you, before Doctor Emmons or before Mr. Emmons?

Miss TIPPETT. No.

The CHAIRMAN. Did you ever see Mr. Maenche drunk?

Miss TIPPETT. No; I never did.

The CHAIRMAN. How long are your hours in the laundry?

Miss TIPPETT. Eight hours.

The CHAIRMAN. Mr. Maenche was frequently there while you were there, was he not?

Miss TIPPETT. Yes.

Mr. HAY. How did he discharge his duties? Was he always there?

Miss TIPPETT. Mostly always.

The CHAIRMAN. He was the active foreman. What I mean is, he was apparently taking care of all he had to take care of, was he not?

Miss TIPPETT. To the best of my knowledge, he was.

Mr. HAY. Did he see this cruel treatment about which you speak?

Miss TIPPETT. No; I don't think he seen that.

Mr. SMYSER. There were some patients who worked in the laundry?

Miss TIPPETT. The patients worked; yes.

Mr. SMYSER. And this Mr. Carter is one of them?

Miss TIPPETT. Yes; he worked there.

Mr. SMYSER. Do you know the origin of the difficulty between him and Mr. Satterfield?

Miss TIPPETT. No, I do not.

Mr. SMYSER. You were there, and you saw what was going on. How did that impress you? Had something occurred to bring it about, or was it——

Miss TIPPETT. No; when I came in, to the best of my knowledge, it was at the dinner hour. I came in from dinner, and when I came in he had him on the floor; and he had his hand on his throat choking him. His face was very red. He was being hurt, I am sure.

Mr. SMYSER. Do you know whether they had had a scuffle before he got him on the floor?

Miss TIPPETT. I have heard that they did.

Mr. SMYSER. Do you know what they scuffled about; what led to it?

Miss TIPPETT. I heard that he was teasing him.

Mr. SMYSER. That Satterfield was teasing Carter?

Miss TIPPETT. Yes, sir.

Mr. SMYSER. And then he choked him?

Miss TIPPETT. Yes.

Mr. SMYSER. Who told you that?

Miss TIPPETT. I heard the girls speaking of it, after I came in.

Mr. SMYSER. What girls?

Miss TIPPETT. I couldn't say, because I don't remember. They were girls around me, but I don't remember what girls they were.

Mr. SMYSER. Just there, at that particular time, seeing what you saw, how did it impress you?

Miss TIPPETT. It made me feel very bad, and we all asked Harry to let the patient alone.

Mr. SMYSER. Who is Harry; Satterfield?

Miss TIPPETT. Yes.

Mr. SMYSER. What did he say?

Miss TIPPETT. He didn't say anything. He went on.

Mr. SMYSER. Did you report that to anybody?

Miss TIPPETT. No, I did not.

Mr. SMYSER. Why? Were you afraid of being discharged yourself?

Miss TIPPETT. Well kind of so.

Mr. SMYSER. You thought it was best to keep still and say nothing. Is that it?

Miss TIPPETT. I would let somebody else do that, I thought.

TESTIMONY OF DR. J. FORD THOMPSON.

Dr. J. FORD THOMPSON, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. Doctor, you reside at 816 Fifteenth street NW., do you not?

Doctor THOMPSON. Yes.

The CHAIRMAN. You are a practicing physician here in the city of Washington?

Doctor THOMPSON. Yes; I practice surgery in the city of Washington.

The CHAIRMAN. You are the consulting surgeon of St. Elizabeth's, are you not?

Doctor THOMPSON. For a certain number of months in the year I am one of the consulting surgeons.

The CHAIRMAN. You visit the hospital frequently in fulfillment of those duties, I suppose?

Doctor THOMPSON. Yes.

The CHAIRMAN. Were you ever called upon to examine a man by the name of George Brown?

Doctor THOMPSON. I do not recall the name.

The CHAIRMAN. A man with a severe scald?

Doctor THOMPSON. Yes; I was called to see him during the winter.

The CHAIRMAN. Will you tell me about that case, if you please?

Doctor THOMPSON. I was telephoned to to come over to the institution to see a man who was suffering with gangrene. I knew nothing of its nature until I reached the hospital.

Upon examination I found that the patient was suffering with a gangrene of the scrotum and about the buttocks and the inner portion of his thigh; but the only part that was well marked gangrene—that is, sloughing of the part—was an area just over the lower portion of the scrotum, perhaps two and a half inches, I should say, in diameter. I found they had been at work on him for several days, and everything had been done very properly. I found there was nothing to do surgically. I told them they would simply have to wait until the sloughing was thrown off, and I gave a favorable prognosis, because I have seen quite a number of similar cases—that is, of gangrene—and as a rule they recover. I had not the slightest doubt this man would recover, and I was surprised about a week or ten days afterward to hear that he had died. My opinion is—I do not know what influence his condition had upon his death, but I expressed the opinion that that was not his immediate cause of death; but I do not know what the result was beyond that.

The CHAIRMAN. You never saw him after that one visit?

Doctor THOMPSON. I only saw him that one time.

Mr. HAY. Do you know the cause of the scald?

Doctor THOMPSON. Well, yes; they explained it to me there. It was a steam scald.

Mr. HAY. Did they say how it occurred?

Doctor THOMPSON. They told me; yes. They explained to me how it occurred. The man was sitting on the closet, or something. I do not know anything about the special arrangement by which the steam reached him, but they told me about the position he was in.

Mr. HAY. Do you go over there often enough to be able to give any opinion as to how the institution is conducted?

Doctor THOMPSON. Yes; I have been there a great many times, away back including the administration of Doctor Nichols. I was there many times during his occupation of that position. Then I was with Doctor Goddard a number of times, and operated a number of times; and afterwards with Doctor Richardson. Doctor White has not been there very long, but I have seen more of him this winter than I did before. So far as my opinion goes, in the conduct of things, I should think it was simply perfection. I have not seen the slightest thing to criticise about it, ever, under the administration of any of those men. They are very solicitous, and are always consulting me. I have never seen the slightest thing to criticise at all, anywhere.

Mr. BARCHFELD. You have never had occasion to find fault with regard to your end of it, as consulting surgeon?

Doctor THOMPSON. None whatever.

Mr. BARCHFELD. They have given you everything you required, or demanded, or asked for?

Doctor THOMPSON. Everything. Everything is arranged in the operating department just as nicely as in any hospital in the city.

Mr. BARCHFELD. You have a modern operating room there?

Doctor THOMPSON. They have a modern operating room, just as good as any of them.

Mr. BARCHFELD. They have modern sterilizers?

Doctor THOMPSON. Yes, sir.

Mr. BARCHFELD. Both for hot and cold water?

Doctor THOMPSON. Everything.

Mr. BARCHFELD. Dressings and instruments?

Doctor THOMPSON. Everything in the world that modern surgery requires.

Mr. BARCHFELD. Do they give you plenty of assistants?

Doctor THOMPSON. Plenty.

Mr. BARCHFELD. Trained nurses?

Doctor THOMPSON. Trained nurses, as good as you find anywhere else.

Mr. BARCHFELD. You do not know of a finer operating hospital in the city of Washington?

Doctor THOMPSON. No, sir. I was particularly struck with the equipments. They are very modern and up to date in every respect.

Mr. SMYSER. If there can be anything delightful about any operating room, anywhere——

Mr. BARCHFELD. I did not use that word delightful.

Mr. SMYSER. Oh, I beg your pardon. I thought you did.

Mr. HAY. From the observation you have had as to the treatment of the inmates by the superintendent and his assistants, what can you say was the usual way in which they have been——

Doctor THOMPSON. As I remarked a while ago, it has been beyond criticism. I have never seen anything in the world to criticise about it. They are solicitous about the condition of the patients, and every time I go over there, in addition to the patients I go especially to see they ask me to see others and express my opinion about them, such as fractures and things of that kind, which I do every time I go over there. I have been called upon to see a number of such patients.

Mr. HAY. Do the patients seem to be at all afraid of the attendants?
Doctor THOMPSON. Not at all.

Mr. SMYSER. You have been connected, as I understand you, with the institution for a long time?

Doctor THOMPSON. With this institution?

Mr. SMYSER. Yes.

Doctor THOMPSON. Yes, sir; well, in a way. Years and years ago they sent for me to perform operations, very frequently, under the administration of the gentlemen I have mentioned.

Mr. SMYSER. During all these years what complaints have come to you of mismanagement or maltreatment of patients over there?

Doctor THOMPSON. None whatever. I know every doctor there, and quite a number of them have been students of mine, and graduated at the college with which I am connected. I know them perfectly well. I never have seen anything but the very best professional treatment; and personally, I have seen nothing to criticise whatever. They are kind and solicitous of the patients, so far as I can see. My opportunities have only been that I have been there perhaps an hour or two at a time, or something of that kind.

Mr. SMYSER. Is it your judgment that this institution has kept pace in the line of modern treatment?

Doctor THOMPSON. I think it is the best institution in the world to-day. That is my opinion about it, if I am asked to express my opinion. The Government has been exceedingly generous in furnishing facilities, and I consider it the best institution in the world to-day, and I have seen a good many.

The CHAIRMAN. You are acquainted with the bath system, are you not—in the treatment of patients with the needle bath?

Doctor THOMPSON. Not very much. I would not like to express an opinion about that. I only saw something in criticism in the paper about such a bath. It occurred to me that the institution ought to have received a compliment for the treatment rather than criticism, so far as I was able to express an opinion.

Mr. SMYSER. One further question. The act providing for the erection of this hospital declares that its object shall be the most humane care and enlightened curative treatment of the insane of the Army and Navy of the United States and of the District of Columbia. During all these years what, if anything, has occurred to your knowledge, or what has come to you, that violated not only the letter but the spirit of that act?

Doctor THOMPSON. I have not heard or seen anything. I have heard of these things going on now, but as far as my own actual observation is concerned, I have seen nothing to justify them whatever.

Mr. SMYSER. Do you know, in a general way, the interest that the residents of the District of Columbia take in the institution? I mean other than Members of Congress and Senators.

Doctor THOMPSON. I know the interest is universal. I know that it is quite natural, every now and then, that investigations of this kind seem to occur without any special reason. As soon as this occurred, for instance, two or three ladies have come over and complained about a patient over there that I had seen, with some fracture—a woman who had had unusual attention in every respect. Yet for some reason or other they seemed to be dissatisfied and made complaint. I told her everything in the world had been done that

could be done, and that there was no reason to complain whatever. That has been the result of my observation; and it is natural, I think.

Mr. BARCHFELD. Your connection with the hospital, directly and indirectly, dates back about thirty years?

Doctor THOMPSON. Yes, sir; it does; away back in Doctor Nichols's time.

Mr. BARCHFELD. Doctor Richardson was superintendent twenty-five years, and this Doctor White has been superintendent for three years.

Doctor THOMPSON. And then Doctor Goddard was between.

Mr. BARCHFELD. Thirty years, at least.

Doctor THOMPSON. Thirty years at least.

The CHAIRMAN. Have you any objection to giving us the name of the patient you mentioned?

Doctor THOMPSON. This lady patient I just mentioned?

The CHAIRMAN. The one who is in the institution.

Doctor THOMPSON. No; I could not really say. I know she had a fracture of the thigh.

The CHAIRMAN. You do not know her name?

Doctor THOMPSON. I did know it at the time; but I took no note of the case whatever.

The CHAIRMAN. How long ago was that?

Doctor THOMPSON. I saw her on two occasions. The first time I visited this patient—no; I visited some other patient; but I mean to say that I examined her, and they asked my advice in regard to the treatment of the case, and all that; and I saw her twice. The first time I saw her was immediately after the accident, it seems to me. I was not sent for especially to see that case; but it occurred either that day or the afternoon before. Then I saw her some weeks afterwards. The second visit, I think, was at the time I saw this gangrene case.

The CHAIRMAN. Was not the name of the patient Griffin?

Doctor THOMPSON. I really could not say.

TESTIMONY OF MISS NELLIE DEMENT.

Miss NELLIE DEMENT, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. You are employed in the laundry of the asylum, are you not?

Miss DEMENT. Yes, sir.

The CHAIRMAN. How long have you been so employed?

Miss DEMENT. Six years.

The CHAIRMAN. What do you know about cruel treatment of patients?

Miss DEMENT. I have seen them abused, rather, several times.

The CHAIRMAN. Very badly abused?

Miss DEMENT. Well, on some occasions they were.

The CHAIRMAN. Will you mention one name of a patient who has been abused?

Miss DEMENT. Alphonzo Rollin, I have seen him beaten, and I know he was very badly hurt. He is a German man, and you couldn't understand anything he said. Whenever he was talking

to you, you didn't know whether he understood what you said or not. If you told him to do anything you would have to show him what to do, and then he could go ahead and do it. When he had been doing nothing at all I have seen Mr. Satterfield beat him. He would be walking along, and if he wasn't going fast enough for him he would kick him and make him go faster. On one occasion I saw him catch him by the collar with one hand, and take his fist and beat him in the back with the other one; but what he was doing at that time I don't know.

The CHAIRMAN. Did you see him knock him down once?

Miss DEMENT. No, sir; I never saw him knock him down.

The CHAIRMAN. Were there other instances that you know of where patients were badly treated?

Miss DEMENT. Yes; I have seen this O'Breedy. I have seen Mr. Satterfield abuse him. One day he came to the water cooler to get a drink of water. I didn't see anything he was doing for Mr. Satterfield to do anything to him; but he came by and struck him in the back and kicked him. He kicked him several times.

The CHAIRMAN. Did you ever make any complaint of this? Did you ever tell the foreman, or Doctor White, or anybody else in regard to it?

Miss DEMENT. No, sir.

The CHAIRMAN. You just wanted to keep out of it?

Miss DEMENT. I did not see that it was my duty to say anything about it, when I thought it was known all through the institution. Everybody knows it.

The CHAIRMAN. Did Mr. Maenche ever see things of this kind going on?

Miss DEMENT. In this Alphonzo Rollin case, when Harry had him, he didn't see him strike him, but he saw him with one hand on his collar and his other hand raised in the act of striking him.

The CHAIRMAN. What did Mr. Maenche say? Did he reprimand Mr. Satterfield?

Miss DEMENT. He just came in the door, and he says, "Harry, what is all this going on here? What is the matter?" I never caught Mr. Satterfield's answer. He taken hold of Alphonzo and carried him and told him to sit down on the table.

The CHAIRMAN. But he did stop the row, did he not, then?

Miss DEMENT. Harry never struck him after Mr. Maenche came.

The CHAIRMAN. Mr. Maenche stopped Mr. Satterfield abusing Alphonzo, did he not?

Miss DEMENT. He had stopped when Mr. Maenche came in. He had his hand there, and as soon as Mr. Maenche said, "What is the matter here," of course he let go of him.

The CHAIRMAN. If there was ever a row there, did not Mr. Maenche always stop it, as foreman?

Miss DEMENT. That I don't know.

The CHAIRMAN. If Mr. Maenche was around he never allowed any illtreatment of patients, did he?

Miss DEMENT. I have never seen them illtreated when he was around before. He had known of them teasing them and never said anything.

The CHAIRMAN. In other words, you say that he had known of

that, and had not spoken to them; but when there was a row that he saw he always stopped it quickly, did he not?

MISS DEMENT. That is the only row I ever seen him around when it happened.

MR. HAY. You say he knew they teased them?

MISS DEMENT. He had known that employees teased patients, and never said anything.

THE CHAIRMAN. What do you mean by teasing—making fun of them?

MISS DEMENT. Making fun of them, getting them angry, you know—getting them excited and mad.

THE CHAIRMAN. Did you ever know anybody but Mr. Satterfield to do that?

MISS DEMENT. Millard Sydnor. He used to have a habit of doing it all the time.

THE CHAIRMAN. Who?

MISS DEMENT. Millard Sydnor. He used to do it quite frequently.

THE CHAIRMAN. Anybody else besides those two?

MISS DEMENT. Not that I can recall any particular occasions when they did it.

THE CHAIRMAN. Did you ever see Mr. Maenche drunk?

MISS DEMENT. I can not say that I have.

THE CHAIRMAN. You have been there in the laundry for six years?

MISS DEMENT. Yes.

THE CHAIRMAN. Has Mr. Maenche been there all the time you have been there?

MISS DEMENT. Yes, sir.

THE CHAIRMAN. You do not think of any particular instances of cruelty that you saw except this one to Rollin?

MISS DEMENT. Rollin and O'Breedy.

THE CHAIRMAN. Those two?

MISS DEMENT. Yes, sir.

MR. HAY. You never have seen the foreman under the influence of liquor at any time during those six years?

MISS DEMENT. I can not say that I have, because they would have to be very badly off if I knew whether they was under the influence or not.

MR. HAY. Was he always in attendance?

MISS DEMENT. Sometimes he was and sometimes he was not. I don't know what his hours were supposed to be down there, but sometimes it would be very late when he would get around.

MR. SMYSER. You did not interfere or say anything to Mr. Satterfield about that incident, did you?

MISS DEMENT. No, sir.

MR. SMYSER. Why did you not?

MISS DEMENT. Because I didn't think it was my place to say anything to him.

MR. SMYSER. But, Miss Dement, you did not like to see the old man treated that way, did you?

MISS DEMENT. No, sir.

MR. SMYSER. But it never occurred to you that you ought to suggest to Mr. Satterfield that it was not proper treatment?

MISS DEMENT. Mr. Satterfield and I wasn't on very good terms. He

had stopped speaking to me. He never spoke to me for two years before he left there, and, of course, I wasn't going to say anything to him. Another thing, I was at my work and had no right to leave my work to go to Mr. Satterfield about anything he was doing.

TESTIMONY OF MR. ODIE BALL.

ODIE BALL, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. Your name is Odie Ball?

Mr. BALL. Yes, sir.

The CHAIRMAN. Where do you live?

Mr. BALL. At the hospital.

The CHAIRMAN. You are at present employed in the hospital?

Mr. BALL. Yes, sir.

The CHAIRMAN. How long have you been employed there?

Mr. BALL. I have been there since 1892, September 16.

The CHAIRMAN. September 16, 1892?

Mr. BALL. Yes, sir.

The CHAIRMAN. You have been there fourteen years?

Mr. BALL. It will be this September, to my calculation.

The CHAIRMAN. What is your position there?

Mr. BALL. I work in the laundry, in the assorting department, and have been there ever since I entered the institution.

The CHAIRMAN. You have been in one or the other of those departments—

Mr. BALL. I have been in the assorting department—one department.

The CHAIRMAN. What are your duties?

Mr. BALL. To assort the clothes for the male side of the house; the male section.

The CHAIRMAN. Did you ever see any cruelty to patients there?

Mr. BALL. No, sir; I was in a position so that I never seen much. I have heard of it, but never witnessed it, because I was in a kind of a little coop of my own, off to one side.

The CHAIRMAN. Did you have men under you who were patients in the asylum?

Mr. BALL. Me?

The CHAIRMAN. Yes. Did you have charge of any of the patients?

Mr. BALL. No; I hadn't charge of anything only my work. That is all I have charge of; assorting.

The CHAIRMAN. But were there not any patients who assisted you?

Mr. BALL. No; only in folding. There were two, but that has been of a recent nature; I guess for the last three or four years.

The CHAIRMAN. You know Mr. Maenche, the foreman?

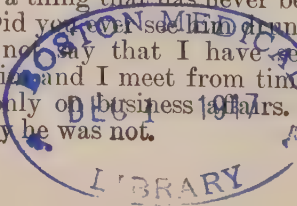
Mr. BALL. Yes, sir.

The CHAIRMAN. Is he superior to you? Does he control your department?

Mr. BALL. That is a thing that has never been decided yet fully.

The CHAIRMAN. Did you ever see him drunk?

Mr. BALL. I can not say that I have seen him drunk, for the simple reason that him and I meet from time to time and have very little conversation, only on business affairs. I couldn't say he was drunk, or couldn't say he was not.



The CHAIRMAN. Was he a drinking man apparently? You know what I mean.

Mr. BALL. As far as that is concerned I guess we all have our times——

Mr. SMYSER. Oh, no.

Mr. BALL. On duty—I couldn't say I ever seen him drunk on duty; not drunk. He may have been drinking——

The CHAIRMAN. What is it, Mr. Smyser?

Mr. SMYSER. He said all. That included everybody.

Mr. BALL. I am not making any specialty of any one party.

Mr. HAY. Do you know anything about any of these charges yourself?

Mr. BALL. The evidence that has been given? No; personally——

Mr. HAY. Not only what has been given here, but anything about it at all?

Mr. BALL. I am a newcomer in the game. I haven't been up. I just came in as the evidence was being given.

Mr. HAY. I am not asking you for that. I am asking you if you know anything about any cruel treatment at the asylum?

Mr. BALL. Cruel?

Mr. HAY. Yes, sir.

Mr. BALL. Well, as far as the cruelty is concerned, I would not consider the treatment was given with cruel intent. It may be cruel in a way, but at the same time we all have lots of things that seem cruel to us, but at the same time it may be for the betterment of our condition.

Mr. HAY. Do you know of any specific case of cruelty yourself, or any knowledge? Not what you have heard other people say.

Mr. BALL. No; not of my own knowledge.

Mr. HAY. In the fourteen years you have been there?

Mr. BALL. I have been partly secluded. I have never visited the wards only in an extreme case of necessity. I never was through the house, and never made it my business to go through to look after the affairs of the hospital. I never entered it unless it was on business principles.

Mr. HAY. All the time you have been there with this superintendent you have not seen him drunk, either on or off duty?

Mr. BALL. The superintendent?

Mr. HAY. Mr. Maenche, the foreman of the laundry.

Mr. BALL. No; I can not say that I have seen him drunk.

The CHAIRMAN. Do you know what these camisoles are?

Mr. BALL. Camisoles?

The CHAIRMAN. Yes. Do you know what they are—this thing that somebody calls a strait-jacket?

Mr. BALL. In my judgment I have an idea what they are.

The CHAIRMAN. Can you describe one? Have you seen them in the wash?

Mr. BALL. I have seen them ever since I went there.

The CHAIRMAN. Please describe them.

Mr. BALL. It is just a union suit. That is about what it would be termed; laced in the back instead of the front. I think union suits button in front, as a general thing; but this union suit laces in the back.

Mr. HAY. You say ever since——

Mr. BALL. Ever since I have been there they have been in use.

Mr. HAY. Ever since you went there?

Mr. BALL. Ever since I have been there they have been in use. They are used in cases such as men that—what would be termed filthy cases, and also destructive.

TESTIMONY OF MISS GERTRUDE HAZEL.

Miss GERTRUDE HAZEL, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. You are employed in the laundry of the hospital, are you not?

Miss HAZEL. No, sir.

The CHAIRMAN. You are not?

Miss HAZEL. No, sir.

The CHAIRMAN. Are you employed in the asylum?

Miss HAZEL. Yes, sir.

The CHAIRMAN. In what position, please?

Miss HAZEL. Chambermaid in the old center building.

The CHAIRMAN. Chambermaid in the old center building?

Miss HAZEL. Yes, sir.

The CHAIRMAN. Do you know this foreman, Mr. Maenche, at all?

Miss HAZEL. Yes, sir.

The CHAIRMAN. Did you ever see him drunk?

Miss HAZEL. No, sir.

The CHAIRMAN. Do you know anything about the condition of affairs in the laundry?

Miss HAZEL. No, sir; I know but very little there.

The CHAIRMAN. Do you know anything about any cruel treatment to patients?

Miss HAZEL. No, sir; I know nothing about that.

The CHAIRMAN. Did you ever see any cruel treatment to patients?

Miss HAZEL. No, sir; I have not.

The CHAIRMAN. How long have you been in the hospital?

Miss HAZEL. I will be there seven years the 7th of June.

The CHAIRMAN. How many patients are there that sleep in the rooms you care for? How many wards are there?

Miss HAZEL. I am not in the wards. I do chamber work for the employees.

The CHAIRMAN. So you do not come in actual contact with the patients at all?

Miss HAZEL. No, sir; I don't come with those at all.

The CHAIRMAN. Did you ever work in the laundry?

Miss HAZEL. Yes, sir; I worked there four years and seven months.

The CHAIRMAN. When did you leave the laundry?

Miss HAZEL. I left there the 15th of December, 1903.

The CHAIRMAN. Was Mr. Maenche foreman then?

Miss HAZEL. Yes, sir.

The CHAIRMAN. Did you ever see him cruel to any of the patients there in the laundry?

Miss HAZEL. I did not.

The CHAIRMAN. Did you ever see any of the attendants under him that were cruel to the patients?

Miss HAZEL. No, sir.

The CHAIRMAN. If there is anything you know that you think would be of advantage in this investigation, I would be very glad to have you tell us, because we want to get all the facts. Is there anything that you know, and that I have not questioned you about, that you think would aid us in this investigation?

Miss HAZEL. My position when I was at the laundry, I wouldn't come in contact with those kind of things. I was a sorter when I was there.

The CHAIRMAN. You were an assorter for the female department, just as the last witness was for the male department?

Miss HAZEL. Yes, sir; of the female department. So those kind of things I never came in contact with.

Mr. SMYSER. How long have you known Mr. Satterfield; ever since you have been there?

Miss HAZEL. Ever since I have been there.

Mr. SMYSER. While you were in the laundry was he there?

Miss HAZEL. Yes, sir.

Mr. SMYSER. How frequently would you see him; daily or otherwise?

Miss HAZEL. I would see him quite often through the day, as I would go up and down stairs. I worked upstairs and he worked downstairs.

Mr. SMYSER. Would you see him at different times during the day?

Miss HAZEL. Yes, sir.

Mr. SMYSER. You never witnessed, as I understand you, any cruelty that you know of? You never witnessed it yourself?

Miss HAZEL. I never did.

Mr. SMYSER. All during the time you were in the laundry there, were there complaints of cruel treatment toward patients there in the laundry?

Miss HAZEL. No, sir; I never heard of any.

The CHAIRMAN. Ladies, were you subpoenaed as witnesses?

Mrs. E. A. OGG. No; but I just wanted to meet this committee before it is through with its work. When would it be best for me to be present?

The CHAIRMAN. Do you mean that you want to be examined as a witness?

Mrs. OGG. I can tell you why I want to come——

The CHAIRMAN. Do you want to be examined as a witness?

Mrs. OGG. For any of these people you mentioned this morning?

The CHAIRMAN. For any purpose. Do you want to be examined as a witness?

Mrs. OGG. Yes, sir; my husband is in the institution. He has recovered, and they retain him there, and I want him home.

The CHAIRMAN. You can be examined right now.

TESTIMONY OF MRS. E. A. OGG.

Mrs. E. A. OGG, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. Do you live in Washington?

Mrs. OGG. Yes, sir; I have lived here for the past four years.

The CHAIRMAN. Is your husband now a patient in the asylum?

Mrs. OGG. Yes, he is a patient in the asylum.

The CHAIRMAN. How long has he been there?

Mrs. OGG. He has been there two years the 23d of last March.

The CHAIRMAN. How did he come to go there? Did he go voluntarily?

Mrs. OGG. We lost our only child—our son—and he just became melancholy. I kept him at the Conrad sanitarium for quite a while, until I felt that I was not able to keep him there. I was advised to send him to the Government Hospital.

The CHAIRMAN. Have you seen him recently?

Mrs. OGG. I have seen him on an average every two weeks ever since he has been there. He is as sane as I am, but he received an injury there. He was pushed down by one of the inmates and broke his hip, and he will be a cripple for life.

The CHAIRMAN. How long ago did he receive the injury?

Mrs. OGG. On the 16th of October, two years ago.

The CHAIRMAN. How soon after the injury did you see him?

Mrs. OGG. Did I see him?

The CHAIRMAN. How soon afterwards?

Mrs. OGG. They didn't let me know anything about it until two days afterwards.

The CHAIRMAN. Do you think he was perfectly in his right mind at the time he received the injury?

Mrs. OGG. Perfectly; and he has been in his right mind all the time since he has been there.

The CHAIRMAN. Do you mean to say he was in his right mind when he went there?

Mrs. OGG. Yes; he was just melancholy.

The CHAIRMAN. Why was he sent there?

Mrs. OGG. Why, I don't know.

The CHAIRMAN. Was he committed there? Was there any proceeding taken to commit him?

Mrs. OGG. Why—

Mr. BARCHFELD. You sent him there, did you not?

Mrs. OGG. I sent him there because he was melancholy, and I had been advised to send him there, that probably he would get rid of that dementia. He seemed to be demented, melancholy.

Mr. BARCHFELD. Was there any court proceeding at the time? Was he examined by physicians?

Mrs. OGG. Yes; he was examined when he came from the Conrad sanitarium. I had two physicians examine him.

Mr. BARCHFELD. And they committed him to the United States hospital?

Mrs. OGG. Yes; for a week or two.

The CHAIRMAN. You signed a petition to have him go there?

Mrs. OGG. Yes; I wanted him to go there, because I thought it would be beneficial for him to go and have treatment; but he didn't have treatment after he was there that was of any advantage.

Mr. HAY. Do you mean to say he was sent there only by these two physicians? Was that the only thing?

Mrs. OGG. He was sent there for the time being; so it then went up to the court, and had to go through court proceedings.

Mr. HAY. He went to court and was regularly committed by the court?

Mrs. OGG. Yes, sir.

Mr. SMYSER. He could only go there under section 4838.

The CHAIRMAN. He was regularly committed.

Mrs. OGG. I suppose why he was committed there was because he would say he didn't care to live; that he would rather be dead than live; and a great many thought, perhaps, you know, he would commit suicide. But he never showed any inclination to do it.

Mr. SMYSER. Is it your opinion that he is now sane?

Mrs. OGG. Yes.

Mr. SMYSER. Have you asked that he be discharged from there?

Mrs. OGG. Yes; I have.

Mr. SMYSER. Have you——

Mrs. OGG. I went before Dr. White——

Mr. SMYSER. Just one moment, please. Have you invoked any legal process?

Mrs. OGG. Not a thing in the world. I wrote to Dr. Hummer and asked him, and he referred me to Dr. White. There was a day set for me to go over there. They kept me there all day, going from building to building, and when I saw Dr. White I was tired out. He was hardly civil to me. I don't know whether he remembers it or not. It was in the administration building.

Mr. SMYSER. How old is your husband?

Mrs. OGG. He is 58 years old, and a very active man up to the time——

Mr. SMYSER. Have you seen him do any work there?

Mrs. OGG. I said he was a very active man up to the time he was injured there.

Mr. SMYSER. He does not work now, and could not?

Mrs. OGG. Oh, no; he is a cripple for life. He hobbles around on crutches. But I want him home. He is as sane as I am, and I don't see why he should be retained there.

Mr. SMYSER. What building is he in over there?

Mrs. OGG. He is in the hospital now.

Mr. SMYSER. Has that any particular name?

Mr. HAY. He is in the hospital of the asylum.

Mrs. OGG. Yes; in the asylum hospital.

Mr. SMYSER. What you wanted to say to the committee, I take it, is this: That your husband is an inmate over there, and you feel that he ought not to be there; that he is no longer insane?

Mrs. OGG. Yes.

Mr. SMYSER. That he ought to be liberated?

Mrs. OGG. Yes; that is exactly what I want.

Mr. SMYSER. That is all I care to ask.

Mr. HAY. You say he was injured there by being pushed down by one of the attendants? Do you know anything about that yourself?

Mrs. OGG. No, I was not a witness to it. Doctor Hummer came over and told me of it. I was not at home, and he told my daughter-in-law that Mr. Ogg wasn't to blame at all, that it occurred in the bathroom; that one of the inmates, I think, used very profane language, vulgar language, and he told him to hush. He just says "You had better hush, now," just in that way, and the man ran up behind him and pushed him down and broke his hip.

Mr. HAY. Who is Doctor Hummer?

Mrs. OGG. I don't know.

Mr. HAY. Is he one of the assistants there?

Mrs. OGG. He is in the hospital where Mr. Ogg is.

Mr. HAY. Your husband was pushed down by an inmate?

Mr. BARCHFELD. One of the patients at the asylum pushed him down?

Mrs. OGG. Yes; one of the patients, I meant.

The CHAIRMAN. One of the other patients?

Mrs. OGG. I don't think Mr. Ogg should have been placed there, because he never showed any inclination to be violent to anyone, all the time, and why he should have been put where he should have been injured I think it was entirely wrong.

Mr. SMYSER. Do you know whether or not it was suspected that he had any suicidal intention?

Mrs. OGG. Why, he said that he would just as leave die as not, he would just as leave kill himself, and all such as that; but all of that is gone now. He is all right, and I want him home.

Mr. HAY. The only way you could get him home would be to go before some one who is authorized, you know. We have no authority here.

Mrs. OGG. I did not know whether you had or not. A friend advised me to come before this committee and make complaint. They didn't know whether it would come under this committee or not.

Mr. BARCHFELD. Who sent you here?

Mrs. OGG. Just a friend of mine. I have not consulted anyone at all; just a young man that was boarding at my house. He was telling me of the committee, and advised me to come over.

Mr. SMYSER. Mrs. Ogg, if he still had that suicidal tendency, do you think he ought to be discharged?

Mrs. OGG. Yes, sir; I do. I am willing for him to be discharged. I am willing to take the risk, and if I am, I am sure nobody else has anything to say.

Mr. HAY. You do not pay anything?

Mrs. OGG. No, I don't pay anything.

Mr. HAY. Is there any reason why they should hold him there?

Mrs. OGG. I don't know any reason why they should. Doctor White can tell you, I think. I went to him, and he wasn't hardly civil to me. He says "Don't you know it is best for him to be here?" I says "We never know what is best, but I think it is best for him to come home." He said "We can take better care of him than you can." He didn't know anything about my ability to take care of him, or his friends or relatives. That is all I got out of him. I went there twice in six months after he was there. I went in and told him I thought he was sufficiently recovered, and wanted him to come home. Some of the doctors said if he would stay there until after the warm weather was over they thought it would be all right to leave. I went to Doctor White, and he said "I don't know, Mrs. Ogg", and that is all I got out of Doctor White. I suppose he had never met him.

TESTIMONY OF ERNEST KLETSCH.

ERNEST KLETSCH, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. Are you employed in the Government Hospital for the Insane now?

Mr. KLETSCH. I was employed there.

The CHAIRMAN. When?

Mr. KLETSCH. (Referring to memorandum.) I was employed from May 15, 1903, to September 3, 1905.

The CHAIRMAN. Two years and a half nearly?

Mr. KLETSCH. Something like that.

The CHAIRMAN. Two years and four months. What is your present business?

Mr. KLETSCH. Fireman in the Department of Agriculture.

The CHAIRMAN. What were your duties in the hospital?

Mr. KLETSCH. From May 15, 1903, to July 27, 1904, I was in the laundry department as a general helper, a laborer; and I then got an appointment in the power house as fireman until I left.

The CHAIRMAN. The power house in the hospital, you mean?

Mr. KLETSCH. Yes, sir.

The CHAIRMAN. You were there as fireman?

Mr. KLETSCH. Yes, sir.

The CHAIRMAN. Did you know Mr. Maenche, the foreman? Was he foreman of the laundry department?

Mr. KLETSCH. Yes, sir; he was my boss.

The CHAIRMAN. He was your boss?

Mr. KLETSCH. Yes, sir.

The CHAIRMAN. Did you ever see him drunk?

Mr. KLETSCH. Yes, sir; I brought him in so drunk he couldn't walk.

The CHAIRMAN. How many times?

Mr. KLETSCH. Several times; several nights.

The CHAIRMAN. Was he on duty at the time?

Mr. KLETSCH. No; it was nights when he would come into his room; and he was drunk on duty many a time.

The CHAIRMAN. Did you ever see any cruelty to the patients that were working in the laundry room?

Mr. KLETSCH. No; there was no cruelty there, except they worked hard and were exposed to the wet in the laundry. They were not able to take care of themselves. They wet themselves more than was necessary, and they have been kept in there now and then when they were real wet. We couldn't keep them from getting wet. Some of them would go to work and dip their heads in the water and wet their breast and everything.

The CHAIRMAN. Did you ever see them knock patients down?

Mr. KLETSCH. No, sir.

The CHAIRMAN. Or hit them, cuff them, choke them, or do things like that?

Mr. KLETSCH. There is nothing like that going on in the laundry, I think; not to my knowledge.

The CHAIRMAN. Did you ever see them knocked down with these boxes that they push the clothes around with?

Mr. KLETSCH. No, sir. I think that must have been after my time, or before, I don't know which. It was not while I was there, but I think Mr. Maenche is not a fit man for the laundry, for he cursed me up and down before a half dozen men and girls, and he cursed the girls. He made me a liar on one occasion to Doctor White, and did other things. I had my appointment July 27 to go to the power house, and he kept me in August, until August, all

through, claiming that I had to break in another man. When I came there I wasn't broke in. I was put to work. That is not a scientific job, you know.

The CHAIRMAN. You say you are employed at the Department of Agriculture?

Mr. KLETSCH. Yes, sir.

The CHAIRMAN. Did you take the civil-service examination for the position?

Mr. KLETSCH. I took it for the hospital and was transferred.

The CHAIRMAN. Did you take an examination when you first went to the hospital?

Mr. KLETSCH. I filled out an application, the same as everybody else.

The CHAIRMAN. Then afterwards you had an examination as fireman?

Mr. KLETSCH. Yes; I filled out an application for fireman.

The CHAIRMAN. When you went to the Department of Agriculture it was by regular transfer upon application made by you?

Mr. KLETSCH. A transfer from the Interior Department.

The CHAIRMAN. Outside of swearing, as far as any physical brutality is concerned, you never saw it in the laundry, did you?

Mr. KLETSCH. No; not that I know of. It never went very straight in that laundry.

Mr. HAY. How is that?

Mr. KLETSCH. Things never went straight in the laundry. There was always something crooked, because Mr. Maenche is crooked.

Mr. SMYSER. What was crooked?

Mr. KLETSCH. His actions.

Mr. SMYSER. What were his actions that were crooked?

Mr. KLETSCH. There is so many—I never came before a committee, and I couldn't remember.

Mr. SMYSER. Give us some of those.

Mr. KLETSCH. There is the case when I got the appointment to go to the power house. I went before Doctor White, and Doctor White listened to me. Mr. Maenche had a conversation with him after that, and Maenche came in drunk one night and says to me, I made a whole lot of trouble for him, and came near having him discharged if Mr. Folsom hadn't lied for him.

The CHAIRMAN. Who is Mr. Folsom?

Mr. KLETSCH. The chief engineer.

Mr. SMYSER. But what is crooked there in the laundry?

Mr. KLETSCH. He would be away for half a day, and nobody knows where he is.

Mr. SMYSER. What else?

Mr. KLETSCH. Being drunk while he was on duty, and not able to fulfill his duty.

Mr. SMYSER. What else?

(No answer.)

Mr. HAY. You said something about the inmates there being hard worked. What did you mean by that?

Mr. KLETSCH. They had to work as hard as I did, and I guess I was working as hard as anybody in the laundry, and the men after me that took the place, because it certainly is hard work.

Mr. HAY. Were they able to work, these insane people?

Mr. KLETSCH. Some were able to work. Some didn't seem to be able to work, but they had to do it.

Mr. HAY. They were compelled to do it?

Mr. KLETSCH. There was nobody there to work them but the laundry force, and we couldn't make no discrimination who was able or not able, or more able or less able. We had to do the work.

Mr. HAY. Were these inmates worked there any more than you were, who were regularly employed?

Mr. KLETSCH. No; but they worked as much as I did, or anybody else.

Mr. HAY. Eight hours a day?

Mr. KLETSCH. No; they worked less, because they came later in the morning, and went away half an hour earlier for meals.

The committee (at 12.15 o'clock p. m.) adjourned until Monday May 7, 1906, at 10 o'clock a. m.

HOUSE OF REPRESENTATIVES,
Washington, D. C., May 7, 1906—10 o'clock a. m.

The committee met pursuant to adjournment.

Present: Messrs. Olcott (Chairman), Smyser, Barchfeld, and Hay.

Present also, Dr. William A. White, Stuart McNamara, F. A. Fenning, Richard T. Evans, Dr. F. M. Gunnell, Doctor Reyburn, and others.

TESTIMONY OF C. P. RHODES.

C. P. RHODES, being first duly sworn, was examined and testified as follows:

The CHAIRMAN. Give your full name.

Mr. RHODES. C. P. Rhodes.

The CHAIRMAN. Where do you reside?

Mr. RHODES. I reside in Washington temporarily. I hold a Government position.

The CHAIRMAN. What is your Government position?

Mr. RHODES. I am a proof reader at the Government Printing Office.

The CHAIRMAN. How long have you been in that position?

Mr. RHODES. I have been a proof reader for ten years; and I have been in Washington for twenty years.

The CHAIRMAN. Do you know anything about the St. Elizabeth Hospital?

Mr. RHODES. I do know a little about it. I sat down to the typewriter this morning and jotted down a few of my thoughts, so that I would not delay the committee.

The CHAIRMAN. Let me see that before you read it.

The WITNESS. I just jotted this down so that I would not delay the committee. The statement I will make I will not make from that paper.

The CHAIRMAN. Mr. Rhodes, we will call you at some future time. You can leave this document with us.

Mr. RHODES. I did not expect that to be my testimony at all; although, of course, those are facts.

TESTIMONY OF JOHN HARRISON.

JOHN HARRISON, being first duly sworn, was examined, and testified as follows:

The CHAIRMAN. Will you state your full name?

Mr. HARRISON. John Harrison.

The CHAIRMAN. Where do you live now?

Mr. HARRISON. I am employed at the Soldiers' Home.

The CHAIRMAN. Have you any employment now?

Mr. HARRISON. Yes, sir; I am employed as engineer at the Soldiers' Home.

The CHAIRMAN. Were you ever employed at the Government Hospital for the Insane?

Mr. HARRISON. Yes, sir; from 1874 up to the present time.

The CHAIRMAN. You are not there now?

Mr. HARRISON. No; I resigned the 10th of last month.

The CHAIRMAN. You were in the employ of the hospital from 1874 until April 10, 1906?

Mr. HARRISON. Yes, sir.

The CHAIRMAN. What was your position there?

Mr. HARRISON. I was assistant engineer.

The CHAIRMAN. Did you ever have any connection with the laundry department?

Mr. HARRISON. I did. I repaired the machinery and all the belts, etc.

The CHAIRMAN. That were used in the laundry work?

Mr. HARRISON. Yes, sir.

The CHAIRMAN. Did you ever see any improper treatment of patients there?

Mr. HARRISON. No, sir; I think not.

The CHAIRMAN. Do you know Maenche, the foreman?

Mr. HARRISON. Yes, sir.

The CHAIRMAN. What sort of a man was he?

Mr. HARRISON. Well, he was a very fine fellow. I have never seen anything wrong about him at all.

The CHAIRMAN. Did you ever see him drunk?

Mr. HARRISON. I have on one occasion. It was just outside the asylum grounds.

The CHAIRMAN. You never saw him drunk on duty?

Mr. HARRISON. No, sir.

The CHAIRMAN. Did you ever see him on duty when you thought he had been drinking, so that he could not take care of his business?

Mr. HARRISON. No, sir; I always saw him when he seemed to be able to carry on his duty.

Mr. SMYSER. Did you see Maenche daily?

Mr. HARRISON. Yes, sir; I saw him most every day.

Mr. SMYSER. Did you come in contact with him?

Mr. HARRISON. I came in contact with him sometimes three or four or five times every day.

Mr. SMYSER. During that whole time you say he was able to take care of his duties properly?

Mr. HARRISON. I was always telephoned to in case anything occurred.

Mr. SMYSER. Would you say that, during that time, he was discharging his duties properly?

Mr. HARRISON. Yes, sir; I would say so.

Mr. SMYSER. Your duty took you to the laundry frequently?

Mr. HARRISON. Yes, sir; I was in there sometimes four or five times every day.

Mr. SMYSER. Would you go if you were sent for?

Mr. HARRISON. Yes, sir; by the foreman. He had a foreman who would just come over to our machine shop.

Mr. SMYSER. And you would drop in at all times in answer to a telephone message to look after the machinery?

Mr. HARRISON. Yes, sir; to repair the machinery and belts.

Mr. SMYSER. I suppose sometimes you would be there but a short time and at other times it would take you longer to adjust the work; is that right?

Mr. HARRISON. That is right.

Mr. HAY. You say you saw this man only on a single occasion when he was drunk?

Mr. HARRISON. Yes, sir; that is right.

Mr. HAY. How long ago has that been?

Mr. HARRISON. That has been about twelve or thirteen months ago.

Mr. HAY. That was outside of the grounds?

Mr. HARRISON. That was outside of the grounds.

Mr. HAY. At what time in the day was it?

Mr. HARRISON. It was in the evening about 6 o'clock.

Mr. HAY. Did you make an affidavit in this case?

Mr. HARRISON. To that effect?

Mr. HAY. Did you give an affidavit to anyone as to what you knew about this case?

Mr. HARRISON. No, sir; I have not.

The CHAIRMAN. Were there any patients employed under you in the engineer department, when you were there?

Mr. HARRISON. We had a patient there; but at the present time he has a cigar stand just inside the grounds.

The CHAIRMAN. Did you ever see any cruelty to patients in the laundry department?

Mr. HARRISON. We did have a coal heaver; that is about all.

The CHAIRMAN. What happened to him?

Mr. HARRISON. Oh, no—I did not understand you, sir.

The CHAIRMAN. I asked you if you ever saw any bad treatment of any patient in the engineering department.

Mr. HARRISON. No, sir; I have not.

The CHAIRMAN. There was only one patient employed there, and he was a coal heaver?

Mr. HARRISON. That is all, sir. He was a coal heaver, that was all in our department.

TESTIMONY OF MRS. MARGARET LOCHTE.

Mrs. MARGARET LOCHTE, having been first duly sworn, was examined and testified as follows:

The CHAIRMAN. Will you state your full name?

Mrs. LOCHTE. Mrs. Margaret Lochte.

The CHAIRMAN. Do you reside in the city of Washington?

Mrs. LOCHTE. Yes, sir.

The CHAIRMAN. Were you ever an inmate of the Government Hospital for the Insane?

Mrs. LOCHTE. Yes, sir.

The CHAIRMAN. When was it?

Mrs. LOCHTE. It was last June.

The CHAIRMAN. In June of 1905?

Mrs. LOCHTE. Yes, sir.

The CHAIRMAN. How long were you there?

Mrs. LOCHTE. I was there about three months. I was there from June until September.

The CHAIRMAN. From June until September of 1905?

Mrs. LOCHTE. Yes, sir.

The CHAIRMAN. Then you were discharged?

Mrs. LOCHTE. Yes, sir; I came home. I don't know whether I was exactly discharged or not, but I came home.

The CHAIRMAN. How did you come to go to the hospital?

Mrs. LOCHTE. I was taken sick and they sent me down to the Washington Asylum first, and from there they sent me over to St. Elizabeth's. I had been sick a good while before ever I went to the asylum.

The CHAIRMAN. What physician attended you?

Mrs. LOCHTE. Doctor Boyd attended me.

The CHAIRMAN. Was it on his advice you went to the asylum?

Mrs. LOCHTE. No, sir; it was on nobody's advice at all. I went to Camp Good Will at first, and I believe I was taken with a nervous spell over there, and they sent me over to the Washington Asylum.

The CHAIRMAN. Do you know who sent you?

Mrs. LOCHTE. No, sir; I do not. I don't know anything about it at all. I wanted to come home, but they wouldn't let me come home.

The CHAIRMAN. Do you remember just exactly when you were sent there?

Mrs. LOCHTE. Not exactly; not the very day.

The CHAIRMAN. Were you out of your head at the time?

Mrs. LOCHTE. No, sir; I was not out of my head at all. I just had a nervous spell, that is all.

The CHAIRMAN. You do not know at all who sent you there?

Mrs. LOCHTE. No, sir; I don't know who sent me there.

The CHAIRMAN. Was there any paper served on you, or any notification given to you in any way, that was written?

Mrs. LOCHTE. No, sir; there was when I was over to the asylum, to appear before the court, but they never sent me there.

The CHAIRMAN. Were you taken before the court?

Mrs. LOCHTE. No, sir.

The CHAIRMAN. Have you got a paper that was served on you?

Mrs. LOCHTE. No, sir; they taken it from me when I was transferred to the asylum.

The CHAIRMAN. Was it when you were in St. Elizabeth's that this paper was served on you?

Mrs. LOCHTE. Yes, sir; I was there when they served it.

The CHAIRMAN. Do you know what the paper said or what kind of a paper it was?

Mrs. LOCHTE. No, sir; I don't just exactly know, only it was for me to appear before the court, I suppose, to be examined.

The CHAIRMAN. Do you know what court it was?

Mrs. LOCHTE. No, sir; I do not.

Mr. BARCHFELD. You are a married lady?

Mrs. LOCHTE. Yes, sir.

Mr. BARCHFELD. Is your husband living in the city?

Mrs. LOCHTE. Yes, sir; I was born and raised here in the city.

Mr. BARCHFELD. How many children have you?

Mrs. LOCHTE. I have five.

Mr. BARCHFELD. When did you have the last one?

Mrs. LOCHTE. Three years ago last December.

Mr. BARCHFELD. Where did you say you had been previous to going to St. Elizabeth's?

Mrs. LOCHTE. I was over to Camp Good Will.

Mr. BARCHFELD. Where is that?

Mrs. LOCHTE. Way out on the Mt. Pleasant road.

Mr. BARCHFELD. What kind of an institution is that?

Mrs. LOCHTE. It is just a summer resort for people to go there for a week or so. It is under a charity association, I think.

Mr. BARCHFELD. You were taken from Camp Good Will to St. Elizabeth's?

Mrs. LOCHTE. Yes, sir.

Mr. BARCHFELD. Who was instrumental in taking you to St. Elizabeth's?

Mrs. LOCHTE. I don't know; there was a policeman and a few other people.

Mr. BARCHFELD. Were you sick at Camp Good Will?

Mrs. LOCHTE. I had been sick. I was kind of nervous, you know, and I had a spell of sickness. I had chills and malaria, I think, and I had something like typhoid fever. I had good attention, but this nurse, Mrs. Roche, advised me to go to Camp Good Will. The next day I wanted to go home, and they persuaded me not to go home. I said I must go home. Then these people said I couldn't go home. I started to go, and I suppose if I had come right straight to the cars it would have been all right, but I turned up a different road and then they ran after me and caught me again. That kind of frightened me and I sat down, and the next thing I knew there was a patrol wagon or an ambulance there, and they taken me to the Washington Asylum. I was down there, and I suppose the excitement and everything down there just made me nervous.

Mr. BARCHFELD. Did your husband object to your incarceration at St. Elizabeth's?

Mrs. LOCHTE. That I don't know.

Mr. BARCHFELD. Was he instrumental, directly or indirectly, in seeing that you were placed in the institution?

Mrs. LOCHTE. No, sir; he didn't want me to be sent there at all. But I had been sick, you know, and they sent me there.

Mr. BARCHFELD. He did not know anything about it?

Mrs. LOCHTE. He didn't know anything about it until the children came home the next day.

Mr. BARCHFELD. Was he satisfied to have you go to Camp Good Will?

Mrs. LOCHTE. No, sir.

Mr. BARCHFELD. Why did you go?

Mrs. LOCHTE. My children were all sick, and the doctor told me to keep them in the fresh air as much as possible, and I couldn't do that

unless I went somewhere with them. I went there, and was taken sick there.

Mr. BARCHFELD. You were over at St. Elizabeth's from June until September?

Mrs. LOCHTE. Yes; I came home about the 17th or 18th of September.

Mr. BARCHFELD. How did they treat you over at St. Elizabeth's?

Mrs. LOCHTE. They treated me pretty badly.

Mr. BARCHFELD. Did they give you any baths?

Mrs. LOCHTE. Yes; they give me baths.

Mr. BARCHFELD. How often?

Mrs. LOCHTE. I don't know; but twice a week, I think.

Mr. BARCHFELD. Did you like the baths?

Mrs. LOCHTE. Yes; but they were pretty rough with me, though. I would like to take them myself, but they wouldn't let me.

Mr. BARCHFELD. You made an affidavit here, I believe?

Mrs. LOCHTE. When I first went to St. Elizabeth's I was there for nearly two days and I never got a mouthful to eat. One of the nurses went and told the doctor I wouldn't eat, and they gave me some kind of tube feeding, or something that they would run way up in your nostrils, and it certainly was punishment. They tied me down in bed and gave it to me. I never refused to eat, because I never had gotten anything to eat, and I told the doctor that if they had brought me something to eat I would have eat it, because I didn't get a thing to eat at the Asylum. I never got anything at the Washington Asylum to eat but one meal of victuals, and I was there for near three days.

Mr. HAY. Who was the physician that put the tube in you?

Mrs. LOCHTE. Doctor Clark.

Mr. BARCHFELD. Don't you think it would be easier to feed a patient through the mouth than to feed him through the nose?

Mrs. LOCHTE. I don't know; but I guess so. He said it was some kind of liquid food.

Mr. BARCHFELD. Certainly it was liquid food, and they were trying to keep you alive, that is what they were trying to do. If you had been perfectly willing to take food——

Mrs. LOCHTE. I was; yes sir, but they never brought it to me.

Mr. BARCHFELD. They would not insist upon going through this strenuous exercise in trying to keep your body alive by feeding you through the nostrils if you would have taken food through the mouth.

Mrs. LOCHTE. I would have taken it if they had brought it to me, but they never brought it to me. Just before they done this act I was sitting in a kind of reception room and there were four women that came and took me bodily right in there, and then took a towel of some kind and put it over my face and wrung it underneath my neck as tight as they could, and I had to fight for my life.

Mr. BARCHFELD. As the result of this awful assault were you sent to the hospital?

Mrs. LOCHTE. No, sir.

Mr. BARCHFELD. You were not injured to such an extent that you required surgical treatment, were you?

Mrs. LOCHTE. No; I was not injured, but my finger was almost knocked out of place. It was swollen way up where one of them had taken it and dragged it way back.

Mr. BARCHFELD. Did they treat you the same way at the Washington Asylum?

Mrs. LOCHTE. Yes; they tied me down in bed and poured stuff down my throat. It was just like lime and water they were pouring down me.

Mr. BARCHFELD. That was at the Washington Asylum?

Mrs. LOCHTE. Yes, sir.

Mr. BARCHFELD. So that all institutions are alike to you?

Mrs. LOCHTE. Yes, sir.

Mr. BARCHFELD. In giving you these baths, did they ever put a wet towel on your head?

Mrs. LOCHTE. No, sir; they washed my head; that was all. They never put any wet towel on my head. Of course all the patients there taken a bath every Friday.

Mr. BARCHFELD. Do you think that the treatment in St. Elizabeth's Hospital improved you any?

Mrs. LOCHTE. Well, I never saw anything the matter with me that I should be sent there. I can't understand why I should be sent up there in the first place and go through all that torture. There was nothing the matter with me but that I was weakened down. My whole constitution was run down.

Mr. BARCHFELD. Your husband is your natural protector?

Mrs. LOCHTE. Yes, sir.

Mr. BARCHFELD. Why didn't he object to it?

Mrs. LOCHTE. He did object.

Mr. BARCHFELD. Is there any record of his having objected?

Mr. HAY. I submit that it is hardly a fair question to ask this woman whether there is a record of his objection.

The CHAIRMAN. You say you voluntarily went to Camp Good Will?

Mrs. LOCHTE. Yes, sir.

The CHAIRMAN. How did you come to be taken from there to the Washington Asylum?

Mrs. LOCHTE. They just brought me there because I was so determined to go home, and they didn't want me to go home.

The CHAIRMAN. Do you know how long you were at the Washington Asylum?

Mrs. LOCHTE. Yes; I went there Thursday night and stayed there all night Thursday night, and Friday morning they taken me away from there.

The CHAIRMAN. I thought you said you were there three days?

Mrs. LOCHTE. I was, at the Washington Asylum.

The CHAIRMAN. How long were you at the Washington Asylum?

Mrs. LOCHTE. I was there three days. I was taken there on Friday and they taken me away on Monday.

The CHAIRMAN. You say that while you were there you only had one meal?

Mrs. LOCHTE. That is all; I had one meal.

The CHAIRMAN. Were you fed with this liquid food there?

Mrs. LOCHTE. No, sir; I was not fed there at all.

The CHAIRMAN. How long did you say you were in St. Elizabeth's Hospital?

Mrs. LOHTCE. I was brought there in June and came away in September.

The CHAIRMAN. You are a Catholic, are you not?

Mrs. LOCHTE. Yes, sir; I am a Catholic.

The CHAIRMAN. Did you ever ask to see a priest over at St. Elizabeth's?

Mrs. LOCHTE. Yes, sir; and they told me they only came there once a year.

The CHAIRMAN. Who told you that?

Mrs. LOCHTE. The nurses; that they only came there once a year.

The CHAIRMAN. Did you ask to see a priest?

Mrs. LOCHTE. Yes; I said I would like to see one, but they said they didn't come there only once a year.

The CHAIRMAN. Do you know what was the name of the nurse that said that?

Mrs. LOCHTE. No, sir; I couldn't tell you that. They were always changing nurses, and I never knew their names. I would know their looks if I saw them, but I couldn't tell you their names.

Mr. HAY. Do you know anything about the treatment of any of the insane there besides yourself?

Mrs. LOCHTE. Yes, sir; I saw them take and beat a woman there one day; a little short woman; and I saw two nurses take her by the hair of the head and just drag her, and they blacked her face and her eye down here, and everything.

Mr. HAY. Do you know their names?

Mrs. LOCHTE. No, sir; not the names of the nurses. I never found out their names because I never meddled with them. I always used to stay out in the hall to myself. I never went in there very much with the patients at all.

Mr. HAY. How long had you been there when this treatment of these people that you speak of occurred?

Mrs. LOCHTE. I guess I was there a couple of weeks or so. I used to see that often—very often. That was the way they would treat them.

TESTIMONY OF ROBERT REYBURN.

ROBERT REYBURN, being first duly sworn, was examined, and testified as follows:

The CHAIRMAN. You are a physician practicing in the city of Washington, are you not?

Mr. REYBURN. Yes, sir.

The CHAIRMAN. How long have you been practicing medicine here?

Mr. REYBURN. I have been practicing here for over forty years.

The CHAIRMAN. Have you frequently visited the United States Hospital for the Insane?

Mr. REYBURN. Yes; a number of times in the last year or two. If the committee will allow me, I would like to say, in two or three words, how I came to be interested in the institution.

The CHAIRMAN. We are willing to hear you.

Mr. REYBURN. I will say that so far as my own case is concerned, a little over three years ago a society was formed called the Medico-Legal Society, of which they asked me to be the presiding officer. This question was taken up, among other matters, and as soon as it

was published in the papers we got all manner of letters, statements, stories, and things which arrested our attention, and so far as I was personally concerned I thought it ought to be looked into. That is how the matter has arisen, so far as I am concerned.

Mr. SMYSER. In doing what you did, with the information coming to you as it did, you acted purely for what you believed to be the welfare of the patients there and the good of the institution?

Mr. REYBURN. Most assuredly, sir.

Mr. SMYSER. You had no other motive or purpose?

Mr. REYBURN. No possible motive.

The CHAIRMAN. Did you communicate with the superintendent in regard to the matters that were complained of?

Mr. REYBURN. Once or twice some patients applied to be released——

The CHAIRMAN. I asked you whether you communicated with the superintendent?

Mr. REYBURN. Yes; I saw him personally on one or two occasions.

The CHAIRMAN. In regard to patients in the asylum, who desired to be released?

Mr. REYBURN. Yes; one was the case of Mr. Willis.

The CHAIRMAN. Did you speak of the charges that were preferred against the asylum?

Mr. REYBURN. The first time I went there I went with a lawyer to see about getting this man released, and we were refused access.

The CHAIRMAN. Did you see Doctor White personally?

Mr. REYBURN. I did, personally.

The CHAIRMAN. Did you tell him that charges had been made against the hospital?

Mr. REYBURN. I said that this man wanted to be released; that he complained of his treatment and wanted to be released. Then Doctor White positively refused. He stated that he did not want any consultation, and positively refused access to the hospital, and finally we had to get an order of the court.

The CHAIRMAN. Did you speak to him then about the general charges you were going to make against the hospital?

Mr. REYBURN. No, sir; I had no opportunity. He refused point blank to have any——

The CHAIRMAN. Did you see Doctor White again?

Mr. REYBURN. I think I saw him twice; but I am not certain.

The CHAIRMAN. Did you ever go through the hospital yourself?

Mr. REYBURN. Yes; once or twice.

The CHAIRMAN. I mean through the wards. I do not mean merely in the administration building.

Mr. REYBURN. Not very lately.

The CHAIRMAN. Did you ever do it?

Mr. REYBURN. Yes; some years ago.

The CHAIRMAN. Have you done it within the last ten years?

Mr. REYBURN. No, sir; I have not inspected the hospital.

The CHAIRMAN. Or within the last fifteen years?

Mr. REYBURN. Yes; I think I have within the last fifteen years, and during Doctor Godding's administration.

The CHAIRMAN. Doctor Godding succeeded Doctor Richardson, did he not?

Mr. REYBURN. Yes, sir.

The CHAIRMAN. It certainly was more than ten years ago that you examined the hospital?

Mr. REYBURN. Yes, sir.

The CHAIRMAN. Did you ever speak to any of the members of the board of visitors in relation to the hospital?

Mr. REYBURN. Yes, sir; I did.

The CHAIRMAN. With whom?

Mr. REYBURN. With the president of the board.

The CHAIRMAN. With Doctor Gunnell?

Mr. REYBURN. Yes, sir.

The CHAIRMAN. Did you make any complaint to him against the hospital?

Mr. REYBURN. Yes, sir; I made complaints to him in regard to the case of Mr. Hoffman. Mr. Hoffman came to me and related so extraordinary a tale that it at first struck me as a dreadful thing.

The CHAIRMAN. Did you ask Doctor Gunnell to make an investigation?

Mr. REYBURN. I did.

The CHAIRMAN. What did he say to you?

Mr. REYBURN. He said he would. As far as I know about it, a day or two afterwards I received a letter from Doctor White denying the charges; but I had seen the patient, and I must confess that I believed that what the patient said was true.

The CHAIRMAN. Where did you see the patient?

Mr. REYBURN. I saw him about the 30th of August, 1905.

The CHAIRMAN. Where?

Mr. REYBURN. At my house. He came to my office.

The CHAIRMAN. Was he a patient who had been in the hospital and been discharged?

Mr. REYBURN. He had been in the hospital; yes, sir. The statement he made to me was that he was in his house and he was suddenly attacked by several policemen and taken to the asylum without any trial or anything of that kind; that he remained there and he described how he was treated there.

The CHAIRMAN. The hospital had nothing to do with his having been taken by a policeman?

Mr. REYBURN. Of course not, primarily.

The CHAIRMAN. Did they have anything to do with it indirectly?

Mr. HAY. Mr. Chairman, do you not think the witness ought to state his case? He has just stated what he knows. I think it would probably be conducive to eliciting the facts if we would allow him to go ahead and get through with it.

The CHAIRMAN. The only reason I interrupted the Doctor was that he seemed to me to be giving a good deal of hearsay evidence. Of course, what we want to get at are facts and any occurrences in the asylum that are the subject of criticism which he personally knows. Doctor Reyburn, you have been a physician so long here in Washington that we know perfectly well that you do not want to state anything except what you know and what you have seen.

Mr. REYBURN. I saw, in regard to this patient.

The CHAIRMAN. I only want to call your attention to the fact that the statute directs the method of procedure by which a patient shall

be apprehended, and that this man Hoffman was probably apprehended by some action entirely outside of the hospital.

Mr. REYBURN. Yes, sir.

The CHAIRMAN. Now, go ahead and make your statement.

Mr. REYBURN. I state that, from the condition of the man, I believed his evidence. In the first place I saw that his nostril had been enlarged and he stated to me it was caused by feeding with a feeding tube. Of course, I did not see it, you know; but I had the physical condition there present, showing that his nostril had been injured in some way and then he stated that it was caused by the use of the feeding tube. Then I saw that his throat had been apparently swollen and he said that that was due to the "wringing out" process. He described how they would take a towel and wind it around his throat.

The CHAIRMAN. You do not know this personally?

Mr. HAY. I think whatever the man exhibited there and the result of the physical examination would be proper.

Mr. SMYSER. You had better caution him to state what he saw.

Mr. HAY. And it might be proper for him to say what the man said was the cause of his physical condition. Then if this man is going to give evidence himself it will corroborate what he is going to say, if he says anything.

The CHAIRMAN. Go on, Doctor Reyburn.

Mr. REYBURN. He said that his throat was injured by being wrung out with the towel, by twisting a towel around his neck. Not only that, but I examined his ear. One of his ears had evidently been injured. The cartilage had been injured and he said that his ear had been battered with a broomstick. He said that the explanation given to him was that this was congenital. That is one of the signs we find in persons who are afflicted with disorders of the mind; but in his case that could not be the cause, because it was not symmetrical. If that were the case the two ears would be alike; but apparently one ear was perfectly sound and in the other apparently the cartilage had been broken by some sort of violence. He said that it was done by being beaten with a broom stick. I believed his story because of what I saw.

The CHAIRMAN. Did you take any proceedings to have this man released from the hospital?

Mr. REYBURN. He had been already released from the hospital.

The CHAIRMAN. Did you have anything to do with his being released?

Mr. REYBURN. No, sir.

The CHAIRMAN. Had you ever seen this man before he called on you?

Mr. REYBURN. Never.

The CHAIRMAN. You never saw him again, did you?

Mr. REYBURN. Yes; I have seen him. He is a clerk in the pension office out in Detroit, I think.

The CHAIRMAN. Did you ever see this feeding process, by putting a tube through the nose?

Mr. REYBURN. Yes; I have seen it.

The CHAIRMAN. It is rather difficult for an attendant to administer food in that way, is it not?

Mr. REYBURN. If the patient resisted it; yes, sir.

The CHAIRMAN. It is much easier to feed a patient who is willing to take food than it is to feed him through a tube in the nose?

Mr. REYBURN. Unquestionably.

The CHAIRMAN. Did you ever feed a patient through the nose?

Mr. REYBURN. Occasionally, but quite rarely. Of course liquid is used.

The CHAIRMAN. Will you describe the process; how is it done and what machinery is used?

Mr. REYBURN. There is simply a tube that is passed into the nose attached to a vessel containing milk or something of that kind. They are fed in that way.

The CHAIRMAN. How do they get the milk to go from the vessel into the nose; is there a siphon arrangement?

Mr. REYBURN. They turn them back usually, and it flows down.

The CHAIRMAN. How large is this tube?

Mr. REYBURN. It is a tube that will fit the nostril usually.

The CHAIRMAN. How long is it?

Mr. REYBURN. It may be four or five inches in length; and then, of course, it is attached to a vessel.

The CHAIRMAN. It consists of nothing whatever but a tube; there is nothing else attached to it?

Mr. REYBURN. There is a tube and it may be attached to a vessel.

The CHAIRMAN. What is it made of?

Mr. REYBURN. The ones I have used very rarely in private practice are made of glass; but in an asylum they would use a metal one, probably.

The CHAIRMAN. The only ones you have seen are glass tubes?

Mr. REYBURN. Yes; the only one I have used.

The CHAIRMAN. Have you ever seen any others?

Mr. REYBURN. We do not use them in private practice.

The CHAIRMAN. Have you ever seen such a one as is used in institutions?

Mr. REYBURN. No; I have never used them, sir.

The CHAIRMAN. And except in your private practice, you have never seen the operation performed?

Mr. REYBURN. No, sir.

The CHAIRMAN. You have performed it by using a glass tube?

Mr. REYBURN. Yes, sir.

Mr. SMYSER. About what was the age of this man?

Mr. REYBURN. I think he was about 23 or 24 years of age. He was a very prepossessing young man.

Mr. SMYSER. I mean Hoffman.

Mr. REYBURN. Yes, sir; he was about 23 or 24 years of age, I should say.

Mr. HAY. You stated that you complained to the president of the board about the treatment of this man. How did that end; what was done?

Mr. REYBURN. I received quite a long letter from Doctor White, going into the details of the case, and denying, of course, that any violence was used with him.

Mr. HAY. Have you a copy of that letter?

Mr. REYBURN. I am not certain whether I have it at home or not.

Mr. HAY. If you have it at home would you object to producing it?

Mr. REYBURN. Not at all. I would be very glad to do so.

Mr. HAY. Was that the end of it?

Mr. REYBURN. Yes, sir.

Mr. HAY. Did you take any further steps in the matter?

Mr. REYBURN. He was out of the asylum at the time and had been out for some time.

Mr. HAY. You spoke of two cases, that of Mr. Hoffman and of somebody else.

Mr. REYBURN. No; I think Hoffman was the only one.

Mr. HAY. That is the only case you know anything about?

Mr. REYBURN. Yes, sir; except from hearsay, of course.

The CHAIRMAN. How long was Doctor Richardson at the institution, if you know?

Mr. REYBURN. I don't know, but I think some three or four years.

The CHAIRMAN. How long was Doctor Godding there?

Mr. REYBURN. He was there quite a number of years. I could not give you the number of years.

The CHAIRMAN. Doctor Godding was preceded there by Doctor Nicholl, was he not?

Mr. REYBURN. Yes, sir.

The CHAIRMAN. And during all the time the institution has been conducted by these several gentlemen, you never went through the asylum?

Mr. REYBURN. I have visited it occasionally, at rare intervals.

The CHAIRMAN. You never went through the wards?

Mr. REYBURN. I never made any detailed inspection at all.

The CHAIRMAN. Your complaint about Hoffman's case was made to Doctor Gunnell, was it not?

Mr. REYBURN. Yes, sir.

The CHAIRMAN. And Doctor Gunnell communicated with Doctor White, did he not?

Mr. REYBURN. Yes, sir.

The CHAIRMAN. And afterwards Doctor Gunnell showed to you a letter he had received from Doctor White in connection with the matter?

Mr. REYBURN. Yes, sir; he sent me the letter, if I remember rightly.

The CHAIRMAN. He sent you a copy of the letter he had received from Doctor White, did he not?

Mr. REYBURN. Yes, sir.

The CHAIRMAN. Will you look at this typewritten copy of a letter and see whether that is the letter that came from Doctor White to you through Doctor Gunnell, in connection with that case?

Mr. REYBURN. I think it is. I think it is probably the same letter.

The CHAIRMAN. If the report that Doctor White gives in that letter to Doctor Gunnell be true, would that modify your feeling that this patient had been badly treated?

Mr. REYBURN. No; I could not deny the evidence of my eyes. I saw his broken ear.

The CHAIRMAN. If everything that is stated in that letter is true it would not in any way modify your opinion in regard to maltreatment?

Mr. REYBURN. No; because of what I saw.

Mr. SMYSER. If what Doctor White says in his letter in respect of this patient and his treatment be true, could that account for the

condition of the patient as you found him, as well as the narration of how it occurred by the patient himself?

Mr. REYBURN. I do not think I would modify my opinion.

Mr. SMYSER. That is not my question. If what Doctor White says in his letter as to the treatment of this patient and his condition be true, could that account for the patient's condition as you saw it?

Mr. REYBURN. No, sir.

(The above letter is marked for identification "Reyburn, No. 1.")
(See page 1715.)

The CHAIRMAN. Did you make an affidavit in connection with this matter?

Mr. REYBURN. I think I did in regard to one or two cases.

The CHAIRMAN. I mean in connection with the recent charges made to Congress?

Mr. REYBURN. I think not. You will remember that I was president of this society, and I appointed this committee. That was the extent of my action.

The CHAIRMAN. You did not act on the committee yourself?

Mr. REYBURN. No.

The CHAIRMAN. Who composed the committee?

Mr. REYBURN. The secretary and Mr. Evans.

The CHAIRMAN. Do you mean Doctor Emmons?

Mr. REYBURN. Doctor Emmons.

The CHAIRMAN. Doctor Emmons and Mr. Evans were the committee appointed by you?

Mr. REYBURN. Yes, sir.

The CHAIRMAN. You did not do any work on the committee yourself?

Mr. REYBURN. No, sir.

The CHAIRMAN. You are the president of the Medico-Legal Society, are you not?

Mr. REYBURN. Yes, sir.

The CHAIRMAN. Do they have frequent meetings?

Mr. REYBURN. No, sir; not very frequent. We have had two or three meetings this year, I think; but we do not have very frequent meetings.

Mr. SMYSER. You, as a citizen and a resident of Washington, with other citizens, are interested in that institution?

Mr. REYBURN. Certainly.

Mr. SMYSER. Do you know whether it is a fact that there are people confined there who are commonly known as imbeciles?

Mr. REYBURN. Yes, sir.

Mr. SMYSER. And persons afflicted with epilepsy?

Mr. REYBURN. Yes, sir.

Mr. SMYSER. Have you or your society, or the other residents of the District, taken any action looking to the segregation of that class of people from the generally insane?

Mr. REYBURN. I think there was a bill introduced in Congress; but I had nothing to do with it. I think it is now in Congress or has been, for something of that kind—for the better classification of the inmates.

Mr. SMYSER. I suppose you are aware of the fact that at present the management out there must accept the institution and the law

under which it is regulated, and receive all patients that are sent there?

Mr. REYBURN. Certainly.

Mr. SMYSER. As to that particular thing, I want to know what interest the people of this city have taken looking to the separation or segregation of that class of unfortunates from people who are generally known as insane. In Ohio we have a hospital for epileptics and we are now trying to get a hospital for what we call imbeciles—harmless, inoffensive people. Has there been any such organized movement on the part of the citizens of the District of Columbia to call that to the attention of Congress, so that you may have some relief in that regard?

Mr. REYBURN. Not that I am aware of, except what I have spoken of in regard to a bill being introduced in Congress.

Mr. SMYSER. That was a mere spasmodic and fragmentary effort on the part of somebody. I want to know whether there has been any well-defined activity on the part of the citizens here looking to such a change in the situation there?

Mr. REYBURN. I think not, sir.

Mr. BARCHFELD. The Medico-Legal Society was organized two years ago, was it not?

Mr. REYBURN. A little more than that; over three years ago.

Mr. BARCHFELD. At the time of your organization how many members signed your constitution and by-laws?

Mr. REYBURN. I think I have in my pocket the list of the incorporators. I was president, Dr. William Hughes was vice-president, Dr. Thomas M. Emmons was secretary, Dr. C. Robinson was treasurer, and the attorney at that time was Mr. Edwin Forrest. Among the charter members are Dr. J. Ramsey Nevitt—

Mr. HAY. In order to save time you can give those names to the stenographer.

Mr. BARCHFELD. How many, all told, were in your society?

Mr. REYBURN. On this list there are eleven or twelve.

Mr. BARCHFELD. That constitutes your membership?

Mr. REYBURN. No; I understand there are quite a number of others on the list; but of course in all societies the attendance is very irregular. Sometimes you get more and sometimes you get less. If you will allow me, I want to say that the thing was dragged along because at first I felt that this thing must be entirely incredible, and we disliked to make anything public until we found there was some truth in it, so that things kept along in that way.

The CHAIRMAN. Did you make any formal charges, in writing, to the Board of Visitors?

Mr. REYBURN. No, sir; not except in that case.

The CHAIRMAN. That was the only time you ever made any formal charges to the Board of Visitors?

Mr. REYBURN. Yes, sir; and I may say that I officiated in several cases where patients applied for a release, and in some cases secured releases.

The CHAIRMAN. Is there any reason that you know of why the administration of this hospital should desire to keep patients who are cured?

Mr. REYBURN. I can not see any reason at all; but the patients were there, and they were discharged.

The CHAIRMAN. Of course the proceedings which were taken by you or under your direction were tried before a proper court, were they not?

Mr. REYBURN. Exactly, and they were released by the court.

Mr. BARCHFELD. Can you tell me how many meetings your society held last year, in 1905?

Mr. REYBURN. I do not think there were over a couple of meetings. I think there were three called this year.

The CHAIRMAN. Will you give that list of members you have to the stenographer?

Mr. REYBURN. Yes, sir.

The list referred to is as follows:

Dr. Robert Reyburn, president; Dr. William Hughes, vice-president; Dr. Charles M. Eimmons, secretary; Dr. C. Robinson, treasurer; Edwin Forrest, attorney.

Charter members: Dr. J. Ramsey Nevitt, Dr. Benjamin Beall, Dr. C. R. Dufour, Doctor Yetton, Doctor Walmer, and Messrs. E. Richard Shipp, C. Meeks, Mr. Scaggs, Edwin Padgett, and Doctor Montgomery.

Mr. REYBURN. Mr. Chairman, I would like to state that I do not think the medical men of the institution tolerate any outrages upon the patients. I completely exonerate them from that. I think it has arisen from other conditions—from the crowded condition of the hospital, etc.—so that they can not supervise it. I do not for a moment imagine or want it to go on record that I believe the doctors have anything to do with the abuse of the patients.

Mr. SMYSER. I take it from what you have stated that it is your judgment these cases of maltreatment of patients are not tolerated by the management of the institution?

Mr. REYBURN. Not at all.

Mr. SMYSER. Is it also your idea that where you have, as we have out there, 2,500 persons as inmates, you may occasionally have an employee who is not as tender in regard to the treatment of patients as he should be?

Mr. REYBURN. Yes; exactly.

Mr. SMYSER. That, unfortunately, will happen in the best-regulated institutions, will it not?

Mr. REYBURN. If you will allow me to say so, I think the simple explanation of it is that we have too many patients entirely in that institution for the number of physicians. When they are shut up during the day, the doctor necessarily goes through the place; but they are shut up in the daytime with the attendant. Some of these patients are violent, some are dirty, and some are objectionable for various reasons, and the attendant is very apt to lose his temper. I think that most of these outrages occur in that manner. The attendants, you know, are not as high a class of men as the physicians, and of course they do not control their tempers. So far as my opinion is concerned, I think if the institution were made very much smaller, or divided up into two or three hospitals, over which there could be better supervision, most of the evils would disappear; but there are far too many people there to be given proper supervision by the doctors, attendants, and employees. I think that is the great source of the evil.

Mr. BARCHFELD. What is the reputation of the visiting surgeons and physicians?

Mr. REYBURN. All of them most excellent.

Mr. BARCHFELD. As a matter of fact, what is the reputation of St. Elizabeth's among the insane institutions of the United States?

Mr. REYBURN. So far as I know it stands high.

TESTIMONY OF DR. J. RAMSEY NEVITT.

Dr. J. RAMSEY NEVITT, being first duly sworn, was examined and testified as follows:

The CHAIRMAN. You are a physician practicing here in Washington?

Mr. NEVITT. Yes, sir.

The CHAIRMAN. How long have you been practicing?

Mr. NEVITT. About fourteen years.

The CHAIRMAN. Have you any official position in connection with the District?

Mr. NEVITT. I am coroner of the District.

The CHAIRMAN. Have your duties taken you to the Hospital for the Insane?

Mr. NEVITT. They have.

The CHAIRMAN. Frequently?

Mr. NEVITT. As coroner I suppose I have been there eight or ten times in the last six years; and I have also been there to see other cases that were not coroner's cases.

The CHAIRMAN. How long have you been coroner?

Mr. NEVITT. For six years next August.

The CHAIRMAN. Have you been out there at other times in a private capacity?

Mr. NEVITT. I have, as police surgeon. I was, for seven years, connected with the District police surgeons, and I have been out there on an average of 60 or 65 times a year.

The CHAIRMAN. Was that especially to see men who had been on the police force?

Mr. NEVITT. No; it was to see the insane who had been taken from the streets and lodged in the station houses. Then the police surgeons were required by the law to examine into those cases and to find out if they were insane; and the law also required at that time, and requires at present, that they should visit the insane after being committed there and render a report in court.

The CHAIRMAN. To whom did you render the report?

Mr. NEVITT. The report is to the Superintendent of Police, and then it is his duty to make a statement before a judge and jury as to the condition of the patient at the time. Two or three weeks may elapse between times.

The CHAIRMAN. Do you know, generally, in regard to the conduct of that asylum?

Mr. NEVITT. I do.

The CHAIRMAN. In your opinion is the administration of that asylum good or otherwise?

Mr. NEVITT. Most excellent.

The CHAIRMAN. You were officially connected with the asylum. Is there any particular change or improvement you could suggest in connection with it?

Mr. NEVITT. I could not.

The CHAIRMAN. In your visits to the asylum, have you ever seen anything like unnecessarily severe treatment of the patients?

Mr. NEVITT. I have not.

The CHAIRMAN. Do you know anything about the case of George Brown?

Mr. NEVITT. I would like to have the privilege of stating how I happened to have that case brought to my attention.

The CHAIRMAN. We would be glad to have you state it.

Mr. NEVITT. Sometime about the 1st of April I received a communication from Lawyer Evans, who represents the Medico-Legal Society, and is its legal officer. I did not receive the communication from him directly, but through Dr. Woodward, who is the health officer of the District, and who forwarded to me the papers coming from Mr. Evans. I found out subsequently that the same papers, or a copy of the same papers, if I am not mistaken, came to the United States district attorney. In fact, I know so, because I asked him if such were the case, and he said that he had received the papers and made a reply to them. About that time I was sick, and I told the District Commissioners that I intended to take a leave of absence, sometime before receiving these papers, and I did take a leave of absence, and I was unable to complete my report. It is now uncompleted, although there is very little of it left to do. I took it up as soon as I was able to do it and got statements from Dr. J. Ford Thompson in person. I also visited the asylum at St. Elizabeth's and saw everyone that I could who had any interest at all in the case of Brown. The institution put at my disposal a stenographer, and that stenographer was present and took notes as I asked the questions from the various officials, from the chief engineer up, and also from the attendants. I did not expect to have a call so soon before this committee; but I was told that I would be called shortly. Saturday was really the first day that I felt able to make the trip. I went over there with my wife, but I was unable to get the notes out by to-day.

The CHAIRMAN. Will you have your report of your investigation of that matter, so that we can call you at another time?

Mr. NEVITT. Yes; I will have it to-morrow.

Mr. HAY. What was the charge about this man Brown?

Mr. NEVITT. The charge was that he did not die from the cause of death as recorded in the death certificate; but that he died from an injury to the scrotum, or soft parts of the privates.

The CHAIRMAN. That is the same case Dr. Thompson testified about.

Mr. NEVITT. Yes, sir; I think I remarked that I visited Dr. Thompson and got a statement from him. Then I went to Mr. Evans and told him, or rather his assistant, how far I had gone in the case.

The CHAIRMAN. We will notify you again, if you will let the committee know when your report is ready.

Mr. BARCHFELD. Is that the only case you know anything about?

Mr. NEVITT. The only one I am supposed to testify about. There is a matter of minor importance—that is, it is of minor importance to my mind—which, I suppose, I could give when I come again.

The CHAIRMAN. You will proceed to prepare the report as soon as possible.

Mr. NEVITT. I think I will have it by 2 o'clock to-morrow and be ready to testify the following morning.

Mr. BARCHFELD. As coroner of this District, have you ever held autopsies yourself?

Mr. NEVITT. Not personally; but I have a deputy coroner who does so by my direction.

Mr. BARCHFELD. He is also a physician?

Mr. NEVITT. Yes, sir.

Mr. BARCHFELD. You were police surgeon for the District for seven years?

Mr. NEVITT. Yes, sir; that was previous to my being coroner.

Mr. BARCHFELD. And you frequently held autopsies then?

Mr. NEVITT. No; but I had them held. I am perfectly familiar with the work personally, so far as that is concerned.

Mr. BARCHFELD. You have held autopsies in your professional career?

Mr. NEVITT. Yes.

Mr. BARCHFELD. Who holds the autopsies at St. Elizabeth's?

Mr. NEVITT. They have an official man there by the name of Dr. Blackburn.

Mr. BARCHFELD. He is the pathologist of the institution?

Mr. NEVITT. Yes; he is the pathologist.

Mr. BARCHFELD. The reason I asked that is that in my county, Allegheny County, we have coroner's physicians who, by direction of the coroner, hold autopsies; and I did not know whether, in counties or districts where they had a physician as coroner, the coroner would hold the autopsies himself.

Mr. NEVITT. No, sir. I may state also that the St. Elizabeth's official holds the autopsies, so far as I know; but the criminal cases come to the hands of the coroner. They are held by my deputy. I suppose they considered this case one that had died from natural causes. That is the question.

TESTIMONY OF THORNTON O. PYLES.

THORNTON O. PYLES, being first duly sworn, was examined, and testified as follows:

The CHAIRMAN. What is your full name?

Mr. PYLES. Thornton O. Pyles.

The CHAIRMAN. Where do you reside?

Mr. PYLES. 900 Twelfth street southeast.

The CHAIRMAN. Have you lived in Washington for a long while?

Mr. PYLES. I have been in Washington for a good while.

The CHAIRMAN. How long?

Mr. PYLES. For several years.

The CHAIRMAN. What is your present occupation?

Mr. PYLES. I am painting.

The CHAIRMAN. Were you an attendant at the Government Hospital for the Insane?

Mr. PYLES. I worked there, sir.

The CHAIRMAN. For how long?

Mr. PYLES. As near as I can call it, it was two years and a half.

The CHAIRMAN. When did you leave there?

Mr. PYLES. I left there on the 30th of May, 1904.

The CHAIRMAN. Who was the superintendent of the hospital then?

Mr. PYLES. Dr. William A. White.

The CHAIRMAN. How long had he been there at that time; do you know?

Mr. PYLES. I can not state the date, but to the best of my knowledge he came there in September.

The CHAIRMAN. Of the previous year?

Mr. PYLES. Yes, sir.

The CHAIRMAN. Who was there when you first went there?

Mr. PYLES. Doctor Richardson; and I worked in the institution under Doctor Godding. That was some time before Doctor Richardson's time.

The CHAIRMAN. How long was Doctor Richardson superintendent; do you know?

Mr. PYLES. I could not exactly give you the time.

The CHAIRMAN. Were you there all the time Doctor Richardson was?

Mr. PYLES. No, sir.

The CHAIRMAN. You were there when Doctor Godding was there. Did you resign or leave.

Mr. PYLES. I resigned under Doctor Godding.

The CHAIRMAN. You came back again when Mr. Richardson was there and stayed there until the 30th day of May, 1904, when Doctor White was superintendent?

Mr. PYLES. No; I was dismissed on the 30th of May, 1904.

The CHAIRMAN. I say you stayed there until May 30th, 1904?

Mr. PYLES. Yes, sir.

The CHAIRMAN. You were dismissed from the institution then?

Mr. PYLES. Yes, sir.

The CHAIRMAN. Do you know anything about any ill-treatment of patients there?

Mr. PYLES. Well, I have seen a good bit of it in various ways.

The CHAIRMAN. What were your duties in the asylum?

Mr. PYLES. I was a nurse.

The CHAIRMAN. In what ward?

Mr. PYLES. I was a nurse in Oak ward. I was given charge of Garfield first. I had charge of the ward.

The CHAIRMAN. What kind of patients were confined in Garfield ward?

Mr. PYLES. It was a mixture, a great variety, as much of an assortment as there was in any ward.

The CHAIRMAN. Were the criminal insane in Garfield?

Mr. PYLES. Not to my knowledge.

The CHAIRMAN. How many people were in Garfield ward?

Mr. PYLES. In Garfield ward there were a good many more than the capacity of the ward.

The CHAIRMAN. About how many?

Mr. PYLES. I think it would be safe to say it would range from 30 to 42, or something like that.

The CHAIRMAN. How many attendants were there?

Mr. PYLES. It varied a great deal. Sometimes there were three and sometimes there was one.

The CHAIRMAN. How long were you in Garfield ward?

Mr. PYLES. I think I was there for in the neighborhood of six months, as well as I can remember.

The CHAIRMAN. Then you went to Oak ward?

Mr. PYLES. I think I was in Oak ward before I went to Garfield ward.

The CHAIRMAN. Were you in Garfield ward at the time you were discharged?

Mr. PYLES. Yes, sir.

The CHAIRMAN. You were in Oak ward before you were in Garfield ward?

Mr. PYLES. Yes, sir.

The CHAIRMAN. What kind of patients were in that ward?

Mr. PYLES. It was a hospital ward, and it was a ward where they received all patients. That is not all; but there were some admitted in other wards. As a rule, there were a good many admitted in Oak ward.

The CHAIRMAN. It was also the hospital ward?

Mr. PYLES. Yes, sir.

The CHAIRMAN. Did your duties take you to both portions of Oak ward—the receiving part of it and the hospital ward?

Mr. PYLES. Yes, sir; I assisted in both parts of the work.

The CHAIRMAN. Will you state what kind of cruelty you saw practiced upon patients?

Mr. PYLES. I have seen it in a good many different ways. I would rather be asked direct questions to the point, and I think I can answer it easier.

The CHAIRMAN. Did you ever see any patients confined in strait-jackets?

Mr. PYLES. I have, sir.

The CHAIRMAN. What does a strait-jacket consist of?

Mr. PYLES. It consists of several yards of canvas, ducking, something similar to what these heavy tarpaulins are made of that cover these express wagons for protecting paper goods and such stuff as they haul, with no top. They have long sleeves that range from about two feet and a half to 4 feet long—each sleeve.

The CHAIRMAN. Are they jackets, or are they combination suits?

Mr. PYLES. It is the strait-jacket we were speaking of.

The CHAIRMAN. It is a jacket down to the waist?

Mr. PYLES. Yes, sir.

The CHAIRMAN. It had these long sleeves?

Mr. PYLES. Yes, sir.

The CHAIRMAN. How was it put on?

Mr. PYLES. In the back of it there were eyelets, the same as shoe eyelets, and put in in the same way, only much larger and much stronger. These eyelets were put at a distance of from $2\frac{1}{2}$ to 4 inches apart. Then they had a heavy twine string, perhaps a linen string, or something that would be strong. That was made very fast in the top hole, and then it was laced like a shoestring and made fast. Then the jacket was made with what are called keepers. They are

loops something similar to the strap on a man's pants that would be worn in the summer time with a belt through them. These keepers would be fixed to these straps, and the man's arms would be put in, and there would be no outlet for the arm. The string would gradually grow smaller and smaller, until it became a solid piece of canvas. The patient's arms would be placed in these jackets, and the arms would be put in that position [indicating], with one end of the string that way and the other end of the string down under the other arm [indicating]. The end of the string on this arm [indicating] would be taken and run around and brought down under this part [indicating], making a half-hitch. Do you understand?

The CHAIRMAN. Yes.

Mr. PYLES. Then it would be repeated. A second wrap would be put on it and the other arm would be fixed in the same position. Then it would go around the patient's waist once and come back and tie in what they call a quaker's knot, a double knot, so that it would be very hard to loosen it. Then there would be a strap put through these keepers and strapped around the waist.

The CHAIRMAN. You mean a leather strap?

Mr. PYLES. A leather strap with a brass buckle and a small brass key to lock it in case they wanted to tie them to the seat. They would take them out and tie them to the trees, and this strap would be fastened around them. The strap would be fastened around the tree and the patient would be told to sit down.

The CHAIRMAN. What other name do they call these besides strait-jackets?

Mr. PYLES. As well as I can remember, I think it is commonly called a strait-jacket throughout the country. They have got some name like canvasole that is used for a certain amount of economy by the Government. It is tougher goods, and it is put on to prevent harmless patients from tearing their clothing up. It is a canvas suit.

The CHAIRMAN. Were you in another hospital before you came here?

Mr. PYLES. I was at Norristown, Pa., nearly four years. I have a diploma from that institution.

The CHAIRMAN. Did you ever see any of these things in use there?

Mr. PYLES. I have, sir.

The CHAIRMAN. Do you think that when this jacket is put on the patients it hurts them?

Mr. PYLES. It depends a good bit on how it is applied. If these wraps are very tight it stops the circulation.

The CHAIRMAN. That depends on the care of the attendant in putting it on?

Mr. PYLES. It does, sir. It depends a good bit on his judgment.

The CHAIRMAN. You have put them on yourself, have you not?

Mr. PYLES. I have, sir.

The CHAIRMAN. What did you put them on for?

Mr. PYLES. In many cases they were put on to keep the patient from harming other patients around them, and from harming the employees and doctors coming through, or to help keep them from hurting themselves.

The CHAIRMAN. It was necessary in many cases to put them on, was it not?

Mr. PYLES. In many cases it was necessary. As they were so short of help it was very necessary.

The CHAIRMAN. Could you have managed the patients successfully if they had not had something of this kind?

Mr. PYLES. If I had had another nurse in the ward with me at the time.

The CHAIRMAN. Were they not sometimes put on to prevent the patients from injuring themselves?

Mr. PYLES. In that case it had been done.

The CHAIRMAN. It had to be put on them, did it not?

Mr. PYLES. It would not have been necessary at all if there had been an attendant to take the patient out and give him a breath of fresh air and walked him around. That would accomplish more good than all the strait-jackets that can be applied, according to my judgment, if it is worth anything in the case.

The CHAIRMAN. Do you think the use of this jacket was cruel to many of the patients that had it put on?

Mr. PYLES. I have seen patients wear that jacket, and when it was taken off their hands would be in that position [indicating] so it would be impossible for them to bend their fingers. It would happen not to be on long enough for a patient to soil everything. I have seen patients' fingers so that it would be impossible—the same as that deformed finger there—to bend it. It would be perfectly straight.

The CHAIRMAN. Was that because the jacket was on too long?

Mr. PYLES. In my judgment it would be, sir. But I want to make the statement that that did not occur at St. Elizabeth's.

The CHAIRMAN. It did not occur at St. Elizabeth's?

Mr. PYLES. Not that one particular case; no.

The CHAIRMAN. I want to know whether anything you saw at St. Elizabeth's hurt the patients?

Mr. PYLES. I have seen patients hurt very severely.

The CHAIRMAN. How long do they usually keep these jackets on at St. Elizabeth's? I am asking you entirely about St. Elizabeth's.

Mr. PYLES. I couldn't say exactly how long; but I have seen them kept on twenty-four hours.

The CHAIRMAN. Without being taken off at all?

Mr. PYLES. Yes, sir.

The CHAIRMAN. Without being taken off and put right on again?

Mr. PYLES. To the best of my knowledge and belief, as near as I can tell the truth, it was not taken off during the twenty-four hours.

The CHAIRMAN. What was the condition of a patient on whom a jacket of that kind was kept all that time?

Mr. PYLES. Well, sir, the man would be excited.

The CHAIRMAN. They would never keep a jacket of that kind on for twenty-four hours unless a man was dangerous, would they?

Mr. PYLES. I have seen them on typhoid fever cases. It was not a jacket of that kind, and yet it would be a jacket.

The CHAIRMAN. What kind of a jacket?

Mr. PYLES. It would be a strait-jacket put on loosely—not put on tight—with a blue band tied across the chest to keep them from getting up, if a man would get a little delirious in typhoid fever.

The CHAIRMAN. In other words, they would be dangerous while

they had typhoid fever and they would have to be restrained in some way?

MR. PYLES. They would have to be restrained if you did not have help enough to look after them and protect the man. If a man was sick it would look to me like he needed the attention of someone to look after him.

THE CHAIRMAN. If you saw a patient that you had the management of have one of these jackets on for too long a time you would have taken the jacket off, would you not?

MR. PYLES. We would not be supposed to take it off until the doctor gives the orders.

MR. HAY. Do I understand the cause of putting these jackets on typhoid-fever patients is that there were not sufficient people there to look after the patients?

MR. PYLES. That is what I aimed to say. That is what I firmly believe.

THE CHAIRMAN. Will you tell me of some particular instance, naming the patient, where a patient was badly treated by having this jacket put on him?

MR. PYLES. I would say a patient by the name of Thornley, in Gray Ash ward.

THE CHAIRMAN. Were you in Gray Ash ward at one time?

MR. PYLES. Many a time. In case of emergency I am called to assist Mr. J. K. Loyd, the graduate nurse of that institution.

THE CHAIRMAN. What happened in the Thornley case?

MR. SMYSER. When was it?

MR. PYLES. It was between May 30, 1904, and sometime during that winter, back. That would be between December, 1903, and May 30, 1904.

THE CHAIRMAN. What happened to him?

MR. PYLES. I saw he had this jacket on.

MR. SMYSER. What did you see? Describe it.

MR. PYLES. I have seen him put them on and tie them up tightly.

MR. SMYSER. Who put them on?

MR. PYLES. The nurse; and I have helped put them on.

MR. SMYSER. What did you put them on for?

MR. PYLES. We put them on on the doctor's order.

MR. SMYSER. What was the patient doing?

MR. PYLES. The patient would be nervous, as I said before.

MR. SMYSER. How would he be nervous?

MR. PYLES. I don't know as I could tell you that.

MR. SMYSER. From what you could see, how would he be?

MR. PYLES. Well, as I am a man who has been working in insane hospitals, I would consider that he would be an ordinary case, about what we have to contend with daily in wards of that kind.

MR. SMYSER. Was he violent?

MR. PYLES. No, sir; I couldn't call him exactly violent.

MR. SMYSER. Did he resist having the jacket put on?

MR. PYLES. He was not a man that would hardly do that.

MR. SMYSER. What in the name of common sense did you two men put the jacket on him for?

MR. PYLES. On the order of a doctor.

MR. SMYSER. Didn't you remonstrate and say there was no occasion for it?

Mr. PYLES. Do you think for one moment——

Mr. SMYSER. I am just thinking about what I am asking you. Did you not remonstrate, when you were asked to put a strait-jacket on a man and there was no occasion for it?

Mr. PYLES. I think it would be out of order for an attendant to ask a physician anything like that.

Mr. SMYSER. Why? Did you think it was wrong when you helped to put this strait-jacket on this man?

Mr. PYLES. I considered that they must give the orders.

Mr. SMYSER. Did you consider that you were doing something that was inhuman and brutal, or anything of that kind?

Mr. PYLES. I considered that it was unnecessary.

Mr. SMYSER. Did you make it known to anybody that you were doing something there which was not justified, or which was improper?

Mr. PYLES. Not on that special occasion. I can't say that I did.

Mr. SMYSER. And you did not say it because you felt as though that was not your business?

Mr. PYLES. No, sir; I felt as if we were in there to look after the interests of these patients and I had a feeling for them, and that it was our duty to do the best we could for them. But we were supposed to carry out the orders of the physicians, as near as possible. I will say that the jacket was put on the man, and that he was in a nervous state, going around as they do, and they did not have help enough to take him out in the yard, and yet let the other man stay in the ward. The man would be safer with a jacket on than he would have been running around the corridor.

Mr. SMYSER. He was not violent and would not have done anybody any harm, would he?

Mr. PYLES. He was excited.

Mr. SMYSER. But he was harmless. There was no tendency on his part, if not restrained, to do damage to anybody?

Mr. PYLES. It is hard to tell what damage he would do, with chairs sitting around.

Mr. SMYSER. Did you not think, when you put this jacket on him, that perhaps if he was not restrained, but was permitted to run around, he might do damage?

Mr. PYLES. Well, the orders were to restrain him.

Mr. SMYSER. I am not talking about the orders. I am talking about a condition of mind.

Mr. PYLES. The condition of mind was that he was in a nervous state, as every insane man is. We got orders to put that on and we applied the jacket as directed.

Mr. SMYSER. Did the order come because he might hurt somebody?

Mr. PYLES. I can't say how the order came.

The CHAIRMAN. Was this jacket put on cruelly? Was it tied so tight that it injured the patient?

Mr. PYLES. I didn't consider that it was put on so tight it would injure the patient.

The CHAIRMAN. If you had been the head of that ward yourself, or the head attendant in that ward, and had the care of the patients, would you have put a jacket on that man at that particular time?

Mr. PYLES. It was the doctor's order, and we are supposed to carry out those orders.

The CHAIRMAN. If the doctor had not been there, and you had had the same number of attendants, would you have put a jacket on this particular patient?

Mr. PYLES. I, myself, do not believe in putting restraint on the men. I have had as many as 13 taken off of violent patients.

The CHAIRMAN. You don't believe in any restraint?

Mr. PYLES. I don't believe in it if it possibly can be helped. One night Dr. D. D. Richardson was coming through, and I asked him if these restraints could not be removed. I felt acquainted with the patients. I had been on this ward for some time, and I think it would have been safe for me to take it off. He said: "Mr. Pyles, you are thoroughly familiar with the men, and if you feel it is safe for yourself and for the attendants I will permit you to take them off." There were 13 taken off in one night.

The CHAIRMAN. Did you ever have any similar conversations with the doctors at St. Elizabeth's?

Mr. PYLES. I have talked with Doctor White many different times and been to see him many times before I was asked to resign.

The CHAIRMAN. Did you make complaint to Doctor White?

Mr. PYLES. I did, sir.

The CHAIRMAN. What about?

Mr. PYLES. I made complaint to him about the patients in the ward and the food for them. One man in particular had no teeth at all, and I asked that a more palatable diet be sent to the old soldiers there—what we call a special diet.

The CHAIRMAN. What about the man without any teeth? Was anything done in that case?

Mr. PYLES. No, sir; that man got no special diet while I was there.

The CHAIRMAN. What was his name?

Mr. PYLES. His name was Henry Hye. He has not a tooth in his head.

The CHAIRMAN. Was there anything done for the old soldiers?

Mr. PYLES. So far as I can remember, there was no special diet came up to the ward of which I had charge.

The CHAIRMAN. Which ward was that?

Mr. PYLES. Garfield first.

Mr. SMYSER. You spoke about patients in strait-jackets being tied to trees. Did you ever see them tied to the trees at St. Elizabeth's?

Mr. PYLES. Yes, sir.

Mr. SMYSER. When?

Mr. PYLES. I have seen them in my time, while I was working there.

Mr. SMYSER. Since your last employment?

Mr. PYLES. Yes, sir.

Mr. SMYSER. Whom did you see?

Mr. PYLES. I don't know as I could call the name exactly, but it was a very common occurrence.

Mr. SMYSER. Who tied them to the trees?

Mr. PYLES. I don't know as I could call their names exactly.

Mr. SMYSER. Were those people from your ward?

Mr. PYLES. No, sir.

Mr. SMYSER. Were they from any other ward?

Mr. PYLES. Yes, sir.

Mr. SMYSER. How was that done?

Mr. PYLES. It was done to prevent the patient from running away.

Mr. SMYSER. I mean the putting of the jacket on him and tying him to the tree. Was that done in a humane manner or how?

Mr. PYLES. In some cases I consider it was.

Mr. SMYSER. Have you in mind some case that you think was not?

Mr. PYLES. I just can't call it to my mind.

Mr. SMYSER. I ask you, because in some cases you say you thought it was and in others you thought it was not.

Mr. PYLES. I can't exactly remember the patient's name; but I think I can produce a diary later on that has been kept for a long time. I think I can produce the diary.

Mr. SMYSER. Who kept it?

Mr. PYLES. It was an employee in the institution.

Mr. SMYSER. I asked you who it was.

Mr. PYLES. I am not in a position at present to say who it was.

Mr. SMYSER. Why not?

Mr. PYLES. Because I would want to know what is going on out there. I think I can produce the diary.

Mr. SMYSER. What objection have you to telling us who kept the diary?

Mr. PYLES. At the present time I am not in a position to tell it.

Mr. SMYSER. Do you mean you don't know?

Mr. PYLES. It is this way: I don't wish any of the employees to lose any of their positions.

Mr. SMYSER. You are perfectly safe.

Mr. PYLES. It has not been safe heretofore, gentlemen. I am safe to say that it has not been safe heretofore in my own case.

The CHAIRMAN. You had better give us the name, because you have got to do it. You may as well give us the name, or you can be compelled to do it. We want the name, and we want that diary more than anything else you have mentioned.

Mr. HAY. Have you seen this diary?

Mr. PYLES. I have heard the man speak of it.

Mr. HAY. I do not think it would be fair to compel him to give the name of the man whom he says kept a diary that he never has seen and does not know anything about.

Mr. SMYSER. What I am asking him for is the name of the man who says that he has such a diary.

Mr. PYLES. If I knew that to be a fact I could tell you, but you say you don't want hearsay.

Mr. SMYSER. You can tell who the man is who told you he had a diary. That is not hearsay.

Mr. PYLES. I feel as if I would be doing him an injustice, and without this honorable body demands it I decline to call the name.

Mr. SMYSER. You know it is our right to get at the facts. Will you not tell us the name of that employee?

Mr. PYLES. I will do it with pleasure later on.

The CHAIRMAN. You mean that you want to speak with the man first and find out whether he objects?

Mr. PYLES. I do not wish to see the man get into any trouble from anything I have to say. I will promise this honorable body that I will repeat the name later on, and if it is in my power I will have this gentleman to bring this diary. I will do what I can to get him. Furthermore, I have at home a list of names of employees who wish

to be summoned to testify in this case; but they are afraid to come here and speak. If this body will state plainly that they are to be treated right after the investigation I will give the names of the ones that have asked me.

Mr. SMYSER. I can only speak for myself, and the record can show that if the management out there should discharge any employee because he is called before this committee, I would be pretty sure to try to have the management looking for a job some place else.

Mr. PYLES. I am glad you feel that way. I think all of you gentlemen feel that way, and I feel it would be safe for anyone to come out and tell the truth, let it be what it might be.

The CHAIRMAN. You need not have any fear of that, I think. I think we all feel the same way with regard to it. There would be no difficulty about that. Do you know of any other particular instance when you think men were confined in strait-jackets unnecessarily?

Mr. PYLES. I can't call them to mind exactly.

The CHAIRMAN. Do you not think that the people who are put in strait-jackets at St. Elizabeth's hospital are put in as carefully as possible by the attendants?

Mr. PYLES. If they were the right kind of attendants they were.

The CHAIRMAN. Were they not usually the right kind of attendants?

Mr. PYLES. Gentlemen, many times there was a class of attendants employed there that were young, youthful-looking fellows, and they had not responsibility enough to manage themselves. When they would come in they would take delight in sitting around, laughing and teasing the old men who had these peculiar actions. There were some very good employees at St. Elizabeth's, and some very poor ones, as I consider them, if my judgment is worth anything in that line.

The CHAIRMAN. Were there some of the attendants in the ward where you worked who came within your description?

Mr. PYLES. I have had young men that the supervisor has brought to me to do what they call learning a new man how to take part in the performance of his duty at the asylum. I have had many new men put under me to receive the first instructions. He would usually be put in the dining room. That would be the first duty assigned to him. I have had many different ones.

The CHAIRMAN. When a man came as an attendant to that asylum he had to be taught by somebody, did he not?

Mr. PYLES. He did, sir.

The CHAIRMAN. Were these young men who came to you to be taught the men who teased these patients?

Mr. PYLES. They would attempt it at times, but different ones of the older employees would speak to them and tell them how it looked, and ask them how they would like to see their father treated in the same way. Many times these young fellows turned out to be very good employees and other times they would get into some trouble and either leave or be dismissed or discharged.

Mr. SMYSER. You did all you could to make proper and capable attendants out of those you had to look after, did you not?

Mr. PYLES. Well, sir, I got disheartened toward the last. I felt as if the doctors wouldn't take a great interest in it that I didn't know who to go to for information when I would see things going as they were.

The CHAIRMAN. How many times did you make complaint to Doctor White?

Mr. PYLES. I saw Doctor White on different occasions; I don't know how many, but I believe it was more times than a half a dozen.

The CHAIRMAN. Did you get any satisfaction from him?

Mr. PYLES. Well, I must say Doctor White usually gave me lots of time to talk to him—I must say that he did. I talked to Doctor White, by my own watch, one day for an hour and fifteen minutes. I timed myself.

The CHAIRMAN. When was that?

Mr. PYLES. As well I can remember, I would think it would be probably in April, 1904.

The CHAIRMAN. Just a month before you left?

Mr. PYLES. Yes, sir.

The CHAIRMAN. What were you talking about particularly?

Mr. PYLES. I was calling Doctor White's attention to the way the potatoes were being served, half dirty, just the same as though you could see the old dried manure that they grewed in. They would be put into a deep pot and stirred around with a stick probably, and then dipped into a big steam-fitted tank.

The CHAIRMAN. Did he say he would have the matter looked into?

Mr. PYLES. He promised me, on one occasion, to have the potatoes peeled for the employees. I asked him if they couldn't peel the potatoes for the old men and all the patients that had palsied hands and were not able to peel them.

Mr. SMYSER. What did the Doctor say to that request?

Mr. PYLES. The Doctor said that he was very busy and it would be quite an expense to the Government to have a large amount of potatoes peeled that had to go to feed the old men in the institution, that it would be such a vast expense to have the work done.

The CHAIRMAN. Was there anything else besides the provender that you talked with him about on that occasion?

Mr. PYLES. I can't call to mind exactly, sir. I have seen as much cruelty applied there on Sunday morning, as I consider it, in waiting for him to come through the ward, with the men standing toeing their line. You would take a crack out of the floor and have a gang of men up toeing this line in this position, each man standing up as erect as their feeble old bodies would permit them, waiting for him to come through. I have seen him pass through the wards and speak to three patients during the time he was going through; and I have seen him pass through the ward and not speak to any of the patients or pass a word with anybody.

The CHAIRMAN. What do you call that?

Mr. PYLES. I think it is formally called the Sunday morning inspection, as well as I know.

The CHAIRMAN. How long would they be in line?

Mr. PYLES. I am not sure, but I think that is broken up now. I talked to the supervisor, and asked him to talk to Doctor White, and I told him I thought it was cruel and asked him to go to Doctor White and explain that these men would stand in line for a certain length of time and then become very tired, and wouldn't it be agreeable for him to let me move the settees out along the corridor so the patients could sit down, and if he wished them to stand up as he came in, I would put them in line as he came in.

The CHAIRMAN. Was that done?

Mr. PYLES. I am not sure; but the last three Sundays I was there, to the best of my knowledge, after waiting a certain length of time they set the patients around in chairs and on the settees, and I believe that out of the three Sundays there was one Sunday he came through. I don't think anything was said about the patients being sitting down.

The CHAIRMAN. You made that suggestion to Doctor White, because you felt that it would be better for the patients, did you not?

Mr. PYLES. I thought it was. I don't know whether I am capable of knowing that or not.

The CHAIRMAN. I am simply asking for your judgment for what induced you to do that.

Mr. PYLES. That was my idea.

The CHAIRMAN. Do you know whether that practice has continued; of standing them up for inspection?

Mr. PYLES. I am not able to say. I hope it has not.

The CHAIRMAN. Had the practice been in vogue there when you were there before?

Mr. PYLES. Yes, sir.

The CHAIRMAN. You thought this was an improvement?

Mr. PYLES. I thought it would be an improvement. In my judgment I would think it was all right. Some of the young soldiers enjoyed standing in line, as it seemed to give them pleasure; but in the ward where I was there were several men who were too old to walk around and with the least little exercise they would become very tired. Therefore the old patients were kept many times from taking long walks. When we had help enough we could take these old patients out and put them under a poplar tree in comfortable seats and then the stronger patients would go out for a walk down by the river and by the garden, and we would give them quite a bit of exercise, which they seemed to enjoy.

The CHAIRMAN. You thought there were not sufficient attendants there, did you not?

Mr. PYLES. I thought so, sir. I really did.

The CHAIRMAN. In view of the fact that you did not have a sufficient number of attendants, could you suggest any change in the management there with what attendants you had?

Mr. PYLES. Could I suggest any change with the amount of attendance we had on hand?

The CHAIRMAN. Yes; when you were there.

Mr. PYLES. I really think that my position in life is too humble, and I hardly believe it would be proper for me to make any such suggestion. I don't think it would be my place to make any suggestion.

The CHAIRMAN. Why, we were never out there until one day last week, and we do not know about this. We have got to go to people who do know. You were there, and that is the reason I asked you the question.

Mr. PYLES. Well, it would be hard to say. I feel as though I could make improvements for the employees and the patients, with the amount of force they have there. I feel as though there could be improvements made by some little changes. The capacity of the dining room was too small, and we had to have lots of the very old men eat out on a table in the hall. It was impossible for one man

to be present at both dining rooms. I have called the supervisor's attention to it, and told him I needed help to distribute the meals for the patients; but the help didn't come. A man by the name of Cosgrove, a very old man, with an excellent appetite and inclined to be greedy, sat down with several of the old men who had their hands paralyzed or some derangement so that they couldn't handle their hands. We aimed to cut their meat so that they could eat it either with a fork or a spoon. Others preferred to use a knife and fork. This man Cosgrove sat down at a place and instead of sitting down at the place where he was accustomed to sit down, where his meat was cut, he sat down at another place and grabbed up a piece of meat that wasn't cut fine, and he got it in his mouth and got choked with it. I was at the other end of the dining room. I ran out, but before I could grab him he fell and cut his eye. He pitched forward and cut his eye a bad gash. That was published in the paper. Different papers published it. Doctor Stack came up and asked me how this happened. I told him that this man grabbed this piece of meat and put it in his mouth.

Mr. SMYSER. You told him what you have told here?

Mr. PYLES. I did.

Mr. SMYSER. That was true, was it not?

Mr. PYLES. It was true.

Mr. SMYSER. That man was not knocked down?

Mr. PYLES. No, sir; he was not knocked down. He was choked by the meat, and after he became choked to such an extent he pitched forward and fell and cut his eye.

The CHAIRMAN. Did you ever see any man knocked down over there?

Mr. PYLES. I don't know as I could just call any particular one of the men.

Mr. SMYSER. Did you ever see the act of knocking a man down there, without being able to give the names?

Mr. PYLES. I have seen lots of cruel abuses; but I don't know any names that I could mention at the present time.

Mr. SMYSER. You know what I mean by knocking a man down. Did you ever see that occur?

Mr. PYLES. I have seen patients knock one another down.

Mr. SMYSER. I am talking more particularly about the attendants.

Mr. PYLES. I can't just recall any particular case. I can't call it to mind.

Mr. SMYSER. Was it a fact that the patients would hit each other at times?

Mr. PYLES. It has been done very often.

Mr. SMYSER. Did you ever see them inflict any injury upon a patient that was struck?

Mr. PYLES. It has been done, sir.

Mr. SMYSER. What I want to know is about the attendants. Did you ever see an attendant knock a patient down?

Mr. PYLES. I just can't recall any particular case.

Mr. SMYSER. Did you ever see an attendant choke a patient?

Mr. PYLES. I have seen a patient, for instance, who would start a fuss, and a man would separate the two. I have seen them choked.

Mr. SMYSER. Would the patients choke each other, or would the attendants choke the patient?

Mr. PYLES. I have seen the attendants choke the patients in self-defense.

Mr. SMYSER. To ward off trouble with the patients; is that it?

Mr. PYLES. I have seen it.

Mr. SMYSER. Did you ever see a man there voluntarily knock down or choke a patient?

Mr. PYLES. I can't say positively that I did.

Mr. SMYSER. You have seen patients fighting, striking, and perhaps choking each other, and the attendants in guarding themselves did those same things; is that it?

Mr. PYLES. I have seen mix-ups with the patients and attendants; but that is out of order. A man is supposed to see as little as possible over at St. Elizabeth's. He is supposed to see as little as possible if he wants to get along and hold his position.

Mr. SMYSER. Of course, position or no position, you could see with your eyes. You are not an employee there now, and you are in no danger.

Mr. PYLES. No; I am not an employee now. I have respect for the place in every way, shape, and form—for the management of it and for the man who is managing it, for the old inmates and down to the smallest employee. I would like to see the place improved, and improvements are coming day after day.

Mr. SMYSER. Do you know Maenche?

Mr. PYLES. I know Mr. Maenche when I see him.

Mr. SMYSER. Did you ever see him drunk out there?

Mr. PYLES. I never associated with Mr. Maenche, but he done me a very kind turn once.

Mr. SMYSER. I know, Mr. Pyles, but did you ever see him drunk there?

Mr. PYLES. Probably I am not able to say whether a man is drunk or not. I take a drink. I had it on my application, when I put it in there, that I took a drink once a day or probably twice a day, and probably have for the last ten years.

Mr. SMYSER. Do you know Satterfield?

Mr. PYLES. I know him when I see him. I am not thoroughly acquainted with him.

Mr. SMYSER. You did not come in contact with these two men very much, I take it.

Mr. PYLES. Yes; I went down in the laundry several times a week to look after the laundry for the patients and the employees.

Mr. SMYSER. For your ward?

Mr. PYLES. Yes, sir.

Mr. SMYSER. Did you ever see cruelty down there?

Mr. PYLES. I have never seen any cruelty in the laundry, more than to see that patients are sent down there to work. I have heard the patients complain very often of how hungry they would feel, being down there at work and coming home at night and not having meat on the table when they came back. I have heard them find a great deal of fault about that.

Mr. SMYSER. I am describing cruelty now in another way. Did you ever see any cruelty or bad treatment of that kind in the laundry?

Mr. PYLES. So far as I know Mr. Maenche, he has treated me as a gentleman.

Mr. SMYSER. I know, but that is hardly an answer to the question.

Mr. HAY. Did you ever see anybody treated cruelly in the laundry?

Mr. PYLES. I considered that it was very cruel to send those men down there and work them on empty stomachs in that laundry—keep them down there day after day. I considered that was one of the most cruel things that could be done to them.

Mr. SMYSER. Have you told us practically all you know?

Mr. PYLES. No, sir; I have not. I know lots more.

Mr. SMYSER. Have you something more to explain about cruel treatment, for instance?

Mr. PYLES. I would say that the instructions they received over there as nurses that I didn't consider in the way it is applied.

Mr. SMYSER. You will notice that you stated to me you knew a whole lot more. Now I am asking your attention to the subject of cruelty.

Mr. PYLES. A man can't think of all these things at one time. He just can't think of them.

Mr. HAY. How often did the superintendent go through this Garfield ward where you were, while you were there?

Mr. PYLES. Two or three times, to the best of my knowledge. He was there more than that. There was one time I seen him come through without anyone accompanying him. It was kind of a rainy day, and the best I can say is that he had been visiting some other part of the institution and came through that ward, around about meal time.

Mr. HAY. Then from the time you were there in September until the time you were discharged about the first of June he came through the ward two or three times?

Mr. PYLES. On Sundays he came there, two or three Sundays, and then I see him come there on this other occasion, as well as I recollect.

Mr. HAY. Were those the only times he came to the ward?

Mr. PYLES. I am not able to say positively, but that is as much as I remember at this time.

Mr. HAY. Did you sign a petition to the board of visitors, along with other attendants of the hospital?

Mr. PYLES. I did, sir.

Mr. HAY. Asking that these conditions you have described be inquired into?

Mr. PYLES. I did, sir.

Mr. HAY. What did the board of visitors do?

Mr. PYLES. I was not allowed to be present, but if I remember right the statement Doctor Godding made was that he made fun of it.

Mr. HAY. How many attendants besides yourself signed this petition?

Mr. PYLES. As well as I can remember there were somewhere about 50.

Mr. HAY. Can you give us the names of those who signed it?

Mr. PYLES. I can furnish a good many names.

Mr. HAY. When did you get up this petition?

Mr. PYLES. I got it up in the months of April and May, as well as I can remember.

Mr. HAY. Before you went away from there?

Mr. PYLES. Yes, sir.

Mr. HAY. What result ever came from it?

Mr. PYLES. They came over there and I was not allowed to be admitted. Doctor White had warned me from entering the institution, after he asked for my resignation. I said that I was not ready to resign, and he sent one of the supervisors over to Fort Myer to see my brother, who I am working for now, to get him to come over and persuade me to resign.

He also sent for my cousin to come up and examine my mind. He said: "The man is crazy; come up and examine him." He came up and examined me, and began to ask me some cross-questions, and then I said, "Why are you doing this? If you come up for a friendly visit, I appreciate your visit; but my duty requires me back at the ward with the patients, and I can't stand out here talking with you any longer." He said: "I want to talk with you a little more." Finally I told him I would leave and I was going back to my ward. Then he said: "Doctor White has sent for me to come up and examine your mind as an insane man, and that is my business." I said: "Doctor, if that's the case go ahead with your questions. I want to be put away if I am insane, so that I can't harm any one in this institution; go ahead with your questions." He says: "I disagree with Doctor White. There is nothing wrong with your mind." At that time Doctor Stack walked in and Dr. R. A. Pyles said: "Well, Doctor, I have got to disagree with you." Doctor Stack said, "You don't disagree with me; I knew there was nothing wrong with Pyle's mind all the time." Then Doctor Stack said, "Doctor White wants to see you in his office." Doctor Pyles said: "I had to report Doctor White to the Interior Department to make him answer two letters I had written on business matters, and he wouldn't answer them; and I will not see Doctor White. You tell him that I don't want to see Doctor White at all."

Mr. HAY. How soon after this petition was gotten up were you discharged?

Mr. PYLES. I can't say exactly; but it was shortly afterwards.

Mr. HAY. You were first asked to resign?

Mr. PYLES. The supervisor came out to me, and I have got proof of this, and the words he said to me were that Doctor White had asked me to send in my resignation. I said: "What is this for, Mr. Coombs?"

Mr. HAY. Who was the supervisor?

Mr. PYLES. George Coombs.

Mr. HAY. Is he there now?

Mr. PYLES. The man is dead. He died while taking a trip for his life. I furnished Mr. Kauffman, with my own hands, one of the board of visitors, with this petition, and he told me he would try and investigate and find out something about it.

Mr. HAY. You made an affidavit in this matter, did you not?

Mr. PYLES. I have, sir.

Mr. HAY. Did the board of visitors have a particular day to go out there?

Mr. PYLES. To the best of my knowledge and belief, as well as I can remember, it was the first Tuesday in every month, which was the day they were expected to come.

Mr. HAY. You said something about sending the old soldiers out of the way when they came.

Mr. PYLES. Yes, sir; those were the orders I would get from the supervisor—"the board of visitors are coming; get them out on the hill; take them away; don't leave them in here." I can't say what they do now, although I have visited the hospital weekly since I came out.

Mr. HAY. I thought you said a moment ago that the superintendent told you not to come there.

Mr. PYLES. He did; but I went to see a lawyer and he said "If you have friends over there and go to visit them I will bear you out in visiting them."

Mr. SMYSER. What were your hours of work?

Mr. PYLES. We were supposed to get up in the morning, as well as I can remember, at 6 o'clock; but I was always up in the morning at fifteen minutes before 6, in order to prepare for duty.

Mr. SMYSER. When did you quit work?

Mr. PYLES. If we had sufficient force we would quit work one evening at 6 o'clock and the other evening at 9 o'clock, provided there was some one there to help; but if not, we would have to stay on and help attend to the patients. I have stayed on as many as three nights in succession.

Mr. BARCHFELD. Who was the attorney who advised you to visit the institution against the directions of Doctor White?

Mr. PYLES. The attorneys that advised me to go there was Douglas & Douglas. I was arrested over there on the 30th of May, and Doctor White tried to prefer three different charges against me for disorderly conduct. I had a reverend minister's name who wanted to be summoned as a witness. I was arrested and taken down to police headquarters and he tried to prefer three different charges against me as a man of dangerous character. I walked up to Sergeant Anderson in Anacostia and asked him what was the collateral, and he said \$20. I said to him, "Sergeant, in \$20 the only charge he could get was disorderly conduct." I put up the \$20 and then I went over the next morning and the case was nolle prossed. I didn't see Doctor White, if he was there. They said it didn't amount to nothing, and I got my \$20 back. I did nothing, but simply sat there and listened to the remarks of Doctor White when he made his speech, and I considered that he made a fairly good talk. If he meant that, I considered it was a very good talk, and I simply clapped for the different speeches. When the American flag was raised I simply raised up and said: "Three cheers for the American flag; may she wave forevermore." That was all that I done.

Mr. SMYSER. Do you know anything about saddling over there?

Mr. PYLES. I have seen a bed saddle.

Mr. SMYSER. Describe it briefly.

Mr. PYLES. As well as I can remember, a bed saddle is a leather pad with loops coming off from it and it is put on behind the patient's back when he lies in bed, and he is strapped to the sides of the bed. There are straps that come across the breast, as well as I remember, and that are tied down to the sides of the bed and also to the top of the bed. Then there are either rolls of towels or sheets or straps for

the business placed around the patient's feet and tied to the post at the foot of the bed, making the patient have access with his head, as far as it goes.

Mr. SMYSER. Did you ever see any people that the saddle was used on put in that position?

Mr. PYLES. As well as I remember I saw them used in Gray Ash on different occasions.

Mr. SMYSER. On what kind of patients?

Mr. PYLES. It would be on nervous patients—probably violent.

Mr. SMYSER. When was this?

Mr. PYLES. I can not recall the date exactly.

Mr. SMYSER. Was it done apparently for the protection of the patient?

Mr. PYLES. In case where they were so short of help it could be used in that way and it would be a protection to the patient.

Mr. SMYSER. In putting a person on the saddle—did you ever see one actually in the process of being put on the saddle?

Mr. PYLES. I assisted in putting one on.

Mr. SMYSER. How was that done, lightly and gently?

Mr. PYLES. It was done just as gently as possible.

Mr. SMYSER. On the patients that you assisted putting the saddle on, did it seem to you that it was painful for the patient to be placed in the saddle?

Mr. PYLES. No, sir; I wish to state that in institutions where help is scarce it is very convenient indeed to have these restraints.

Mr. SMYSER. If you know of any instance of a person being, as you thought, improperly confined to the saddle, give us when it was, and, of you can recall the name of the patient, state it.

Mr. PYLES. I can not say exactly, and I can't call the dates.

Mr. SMYSER. Now, about the food, other than what you have told us. Do you know anything about improper food out there?

Mr. PYLES. I would consider it so. It was not palatable to men working hard, let alone a person who felt broken down and delicate. I wouldn't consider it anyways palatable, and a good proof of that is to go to the several saloons which I will mention and watch the employees come there and make the free lunch fly.

Mr. SMYSER. We have seen statesmen do that.

Mr. PYLES. Well, of course statesmen may have a chance to get out to do it, but, I tell you the inmates can't get out to do it.

Mr. SMYSER. What we want to know about is whether improper food was furnished.

Mr. PYLES. I think I can explain that, to the best of my knowledge.

Mr. SMYSER. I wish you would do that briefly.

Mr. PYLES. What I would call improper food would be for a man that had no teeth, or only three teeth—and perhaps those three teeth had become decayed and the gums cruelly swollen and sore—for to receive beefsteak that a man with as good teeth as I have would find it impossible to bite through—to put it in front of his teeth and bite through it without using extra effort to get his teeth through this beef. I have seen haddock fish come over there—and there are several men in the kitchen that asked me night before last to have them fish—that was something awful, because of the smell. On one occasion, who want to make that statement to you about this

casion I found two rotten eggs on the table at which I ate, and I took them to the gentleman that was measuring the food, and he said that we were getting too much animal matter. What his salary was I don't know. I produced these two rotten eggs, which were brought to the dining room in which I ate, and I took them to him. He left inside of twenty-four hours. He was dismissed for good.

Mr. SMYSER. When was the rotten-egg transaction?

Mr. PYLES. I can't exactly remember the date, but I know it happened.

Mr. SMYSER. About when?

Mr. PYLES. I couldn't say.

Mr. SMYSER. Was it during your last service?

Mr. PYLES. It was during my last employment there.

Mr. SMYSER. You speak of that happening in the dining room in which you ate?

Mr. PYLES. Yes, sir.

Mr. SMYSER. Was that the attendants' dining room?

Mr. PYLES. Why, the patients in my ward never seen an egg.

Mr. SMYSER. Was there an attendants' dining room?

Mr. PYLES. It was supposed to be an employees' dining room; yes, sir.

Mr. SMYSER. If you have any knowledge on the subject of improper food for the patients, other than with reference to the beef-steak, we want to know it.

Mr. PYLES. If I haven't I want to be pushed aside. It may be something I have a different idea about from anybody else; but if you gentlemen decide that I have not, I don't want a word of it published for anything, because I wouldn't want any such statement to be given out.

Mr. SMYSER. Have you any knowledge of improper food being furnished to the patients?

Mr. PYLES. To the best of my knowledge I would say that I have.

Mr. SMYSER. During your last stay over there?

Mr. PYLES. Yes, sir.

Mr. SMYSER. State briefly what it was.

Mr. PYLES. It would be potatoes barely half cooked, and hard. Some of the potatoes would be very watery. You would break them open and instead of finding nice potatoes like a man's wife or some decent boarding house would furnish—I have never seen a mealy potato cooked in that institution, only the tidbits that came from the doctors' table. I have noticed some very good potatoes come from his table, which his cook has given me many times, and I always relished it when I had it. I have seen beefsteaks that thick [indicating] many a time that were very palatable and I would always appreciate it. I would usually give her a pair of my cast-off shoes for her work down in the cement kitchen. I have seen, as I say, this improper food applied to Patrick Buckley, an old patient over there, and I have begged the supervisor to give him a special diet. I have asked for milk for him, but I have never seen him get it in my stay there. Whether he does now I am not able to say.

The CHAIRMAN. Will you be so kind as to return here on Wednesday and give us the name of the gentleman who has the diary of it or who stated to you that he had a diary?

Mr. PYLES. Gentlemen, I will do my best to get him to produce this diary.

Mr. SMYSER. Oh, no; just give us his name.

Mr. PYLES. I will promise you I will give you the name of the man.

Mr. SMYSER. That is all that we are going to ask of you.

Mr. PYLES. And I consider that if you honorable gentlemen would publish in the newspapers and invite the attendants over there to give their statements, and they would not be discharged, that you would have to have a larger room than this to get the evidence of facts in. This room would not be large enough, because there are a good many of them that want to come over and testify and they are afraid. They are afraid, gentlemen, to come over and testify before this honorable body. They are afraid to stand up for the interests of the old people who look to them for protection, and such men make a very poor class of attendants. I would just like to have you invite the institution to come over and give them to understand that it will be a little different from an examination by the board of visitors.

Mr. SMYSER. You be here at 10 o'clock on Wednesday morning. Will you look at this paper and state whether that is the paper you gave to Doctor White?

Mr. PYLES. I see where it looks as though it had been scraped off. There were a good many original signatures, and some of them I have in my pocket. I have got a part of it here in my pocket with the original signatures on it.

Mr. HAY. If you have got the original signatures I would like to have them.

Mr. PYLES. If there is no objection I will sit over here and read it.

Mr. SMYSER. Very well; sit down there and glance over it.

The witness examined the paper, and stated that it was the petition presented to Doctor White.

The above-mentioned paper is marked for identification J. O. Pyles No. 1. (See page 905.)

TESTIMONY OF SOPHRONIA HOWARD.

SOPHRONIA HOWARD, being first duly sworn, was examined, and testified as follows:

Mr. SMYSER. Where do you live?

Mrs. HOWARD. I live northeast; that is my home, or what I call my home. I live at St. Elizabeth's now.

Mr. SMYSER. How long have you been there?

Mrs. HOWARD. For three years on the 8th of June.

Mr. SMYSER. What ward are you in?

Mrs. HOWARD. I am in no ward at all. I am in the laundry.

Mr. SMYSER. Are you an employee?

Mrs. HOWARD. Yes, sir.

Mr. SMYSER. How long have you been in the laundry?

Mrs. HOWARD. Three years the 8th of June.

Mr. SMYSER. What have you seen since you have been there in the way of cruel treatment?

Mrs. HOWARD. Last September a year ago, as near as I can explain it to you, was the first time of my seeing a patient cruelly treated,

that I have noticed it. I saw Mr. Henry Satterfield beat a patient that was called O'Breedy. That is what I called him, because it is just what I have heard him called. I don't know whether it is a nickname or a right name. I saw him both kick and beat at the same time. He chased him down into the wash house and back again.

Mr. SMYSER. Do you know what the occasion of that was?

Mrs. HOWARD. No, sir; I do not.

Mr. SMYSER. Whereabouts did he kick him?

Mrs. HOWARD. He kicked him all about his body here [indicating] with heavy laundry shoes.

Mr. SMYSER. Where did he strike him?

Mrs. HOWARD. He struck him in the back and in the head, this way [indicating], at the same time.

Mr. SMYSER. Did he knock him down?

Mrs. HOWARD. No, sir; he didn't knock him down until he got into the wash house, and then he fell and got up again and run out toward the dry house.

Mr. SMYSER. O'Breedy did?

Mrs. HOWARD. Yes, sir.

Mr. SMYSER. Can you tell us what occasioned this treatment on the part of Satterfield? Was he drunk?

Mrs. HOWARD. No, sir; I couldn't say he was.

Mr. SMYSER. Did you say anything to him?

Mrs. HOWARD. No, sir; not at that time. I have said things to him before.

Mr. SMYSER. I mean about that occurrence?

Mrs. HOWARD. No, sir.

Mr. SMYSER. Did you say anything to the superintendent?

Mrs. HOWARD. Yes, sir; I said it to the doctor.

Mr. SMYSER. When did you tell Doctor White about it?

Mrs. HOWARD. When he called me up on investigation.

Mr. SMYSER. Did you tell him what you had seen?

Mrs. HOWARD. Yes, sir.

Mr. SMYSER. Where is Satterfield now?

Mrs. HOWARD. That I couldn't tell you.

Mr. SMYSER. He is not out there?

Mrs. HOWARD. No, sir; he is not in the asylum at all—not in the laundry at all.

Mr. SMYSER. Do you know whether he was discharged?

Mrs. HOWARD. No, sir; I couldn't tell you that because I was not there. I was home sick at the time.

Mr. SMYSER. Did you see this, in respect to Mr. O'Breedy, more than once?

Mrs. HOWARD. I never noticed it before.

Mr. SMYSER. Did you ever see any other patient maltreated there?

Mrs. HOWARD. Yes, sir; I have. On one occasion Mr. Satterfield had a patient down in front of the dry house.

Mr. SMYSER. Who was the patient?

Mrs. HOWARD. His name was Willie; that's all I can tell you. He knocked him down and got on the patient and had his knees buried in the pit of his stomach. The patient hollered manful. He hollered loud to let him up. Then I saw Mr. McMurray run to him and say to him: "Harry, let this patient up; that is not the way to

treat these patients. They are under my care, and you have got no right to mistreat a patient in that way," he says.

Mr. SMYSER. Did you see him knock Willie down?

Mrs. HOWARD. Yes, sir; I did.

Mr. SMYSER. How did he do it?

Mrs. HOWARD. They got to tussling, I believe; but I could not exactly tell what they got to tussling over.

Mr. SMYSER. Did he use his fist?

Mrs. HOWARD. Yes. He wrestled with the patient, and the patient and him fell. I want to give you a good understanding as near as I can. Of course you know I am not a man, and can't make you understand like a man; but you will have to excuse me. I am trying to make you understand the best I can.

Mr. SMYSER. What I want to get at is this: If you saw Satterfield strike him we want to know it.

Mrs. HOWARD. Yes, sir; he struck him, and then he grabbed hold of him and threw him down. I was standing at the water cooler when he done it.

Mr. SMYSER. How far off were you?

Mrs. HOWARD. I reckon about 3 or 4 yards, as near as I can explain.

Mr. SMYSER. When McMurray interfered, what did Satterfield do?

Mrs. HOWARD. Satterfield went away, and he kind of got mad with Mr. McMurray. He didn't seem to like Mr. McMurray from that time. I don't know what was done.

Mr. SMYSER. What became of the patient, Willie?

Mrs. HOWARD. He went around by the flannel mangle and stood around there.

Mr. SMYSER. Did he continue to work there after that?

Mrs. HOWARD. Yes, sir; he worked there all along. He went from the ward at half-past 11 and came back again in the evening.

Mr. SMYSER. Did Satterfield ever have any other trouble?

Mrs. HOWARD. No, sir; not that I know of, he didn't.

Mr. SMYSER. Did you ever see Satterfield, or any other attendant there, abuse the patients in the laundry?

Mrs. HOWARD. I have never seen anyone else but Mr. Satterfield. I have heard Mrs. Frasier say that on one occasion she saw one of the boys——

Mr. SMYSER. What is Mrs. Frasier's first name?

Mrs. HOWARD. Minnie Frasier.

Mr. SMYSER. Is she a married lady?

Mrs. HOWARD. Yes, sir; I think she is. She is in the dry house, and I heard her say that she had seen——

Mr. SMYSER. She can tell what she saw for herself.

Mrs. HOWARD. Certainly; but I thought maybe you wanted me to explain to you about it as near as I can.

Mr. SMYSER. Did any other employee make complaint, that you know of, of cruel treatment there? If so, give us the name of the employee.

Mrs. HOWARD. I don't know exactly what employee has made complaints; but there are different ones has seen the patients, so they have told me, being cruelly treated.

Mr. SMYSER. Mr. Satterfield and you never had any trouble?

Mrs. HOWARD. Not a bit in the world. Mr. Satterfield and I always were good friends. I never had a cross word with Mr. Satterfield in my life. I was good friends with them all.

Mr. SMYSER. Did you know Maenche?

Mrs. HOWARD. Yes, sir; I should say I do know Mr. Maenche. He is sitting right there.

Mr. SMYSER. Did you ever see him maltreat a patient around the laundry?

Mrs. HOWARD. No, sir; I never did see Mr. Maenche treat a patient cruelly himself, but he has allowed it to be done.

Mr. SMYSER. How do you know that?

Mrs. HOWARD. Because one day Satterfield was abusing little Joe and he opened the door and walked in on him.

Mr. SMYSER. Joe O'Breedy?

Mrs. HOWARD. No, sir; not Joe O'Breedy. I don't know what his name is, but we called him "little Joe." Mr. Maenche says, "Harry, if I see you do that again I will fire you."

Mr. SMYSER. What is that?

Mrs. HOWARD. He says, "If I see you do that again I will fire you." That is what Mr. Maenche said to Mr. Satterfield; but Mr. Maenche didn't fire Mr. Satterfield for that. It seemed to me as if Mr. Satterfield was running the laundry and not Mr. Maenche.

Mr. SMYSER. Did you ever see Maenche drunk over there?

Mrs. HOWARD. I have.

Mr. SMYSER. When?

Mrs. HOWARD. I couldn't tell you exactly when it was. I didn't make it my business to inquire into it, when, or where, or anything about it; but I can say that I smelled it on Mr. Manche's breath and he acted like a man who was under the influence of liquor.

Mr. SMYSER. More than once?

Mrs. HOWARD. I couldn't say that I have seen him; but that was the time I noticed it particularly.

Mr. SMYSER. What time did you go to work in the morning?

Mrs. HOWARD. I got to work at a quarter after 7 and stopped at half-past 4.

Mr. SMYSER. Would you see Maenche over there every day?

Mrs. HOWARD. Sometimes I would and sometimes I wouldn't.

Mr. SMYSER. How often did you see Satterfield?

Mrs. HOWARD. I would see him every day.

Mr. SMYSER. You would see him frequently?

Mrs. HOWARD. Yes, sir; only when he was on his month day.

Mr. SMYSER. As to what took place elsewhere in that institution, I suppose you don't know anything, except what you heard?

Mrs. HOWARD. Yes; I have seen Mr. Satterfield abuse another patient called Alphonzo.

Mr. SMYSER. What did he do?

Mrs. HOWARD. I seen him one day grab the patient by the head and ram his head against the door, like that [indicating].

Mr. SMYSER. What was the patient doing?

Mrs. HOWARD. He was not doing anything. He was shaking out some sheets. I was not close enough to see that.

Mr. SMYSER. Did you call the attention of Mr. Maenche to that?

Mrs. HOWARD. No, sir; I never interfered with Mr. Maenche's business whatever.

Mr. SMYSER. But it was the business of everybody down there to see that the patients were not cruelly treated.

Mrs. HOWARD. Mr. Maenche was foreman, and I thought while he was foreman he could see such things as that going on, and it was his place to interfere and not mine.

Mr. SMYSER. Did he see that?

Mrs. HOWARD. No, sir; I don't know that he did; but he saw him when he was abusing little Joe and called it to his attention, and said if he saw him again he would fire him. But when Mr. Satterfield abused Mr. Maenche and cussed him, did Mr. Maenche pass Mr. Satterfield up and turn him away, or did he file an insufficiency report against him like he did me? He filed an insufficiency against me, and I proved to Doctor White that it was absolutely false. There is the Doctor, and he knows when it was.

Mr. SMYSER. Are you employed there now?

Mrs. HOWARD. Yes, sir.

The committee thereupon took a recess until 2.30 o'clock p. m.

The committee reassembled at the expiration of the recess, Mr. Smyser in the chair.

Hon. Robert M. Wallace, a Representative from the State of Arkansas, appeared, and temporarily took the place on the committee of Mr. Padgett.

TESTIMONY OF MISS NANNIE H. GRIFFIN.

Miss NANNIE H. GRIFFIN, being duly sworn, was examined and testified as follows:

The ACTING CHAIRMAN. Where do you live?

Miss GRIFFIN. 151 Carroll street SE.

The ACTING CHAIRMAN. How long have you been a resident of Washington?

Miss GRIFFIN. All my life.

The ACTING CHAIRMAN. Are you a married lady?

Miss GRIFFIN. No, sir.

The ACTING CHAIRMAN. Were you ever an attendant or employee at the hospital?

Miss GRIFFIN. No, sir.

The ACTING CHAIRMAN. You never were a patient, as I understand?

Miss GRIFFIN. No, sir; I never was.

The ACTING CHAIRMAN. Have you had any friend who was a patient?

Miss GRIFFIN. Never.

The ACTING CHAIRMAN. Have you been to the hospital?

Miss GRIFFIN. Yes, sir; every day for the last two years, visiting my mother.

The ACTING CHAIRMAN. Oh, I see. You have misunderstood the form of the question.

Mr. HAY. She said she had a mother there.

The ACTING CHAIRMAN. I beg your pardon. You say you have been there every day for the last two years?

Miss GRIFFIN. Yes.

The ACTING CHAIRMAN. When was your mother sent there?

Miss GRIFFIN. On the 14th day of April, 1904.

The ACTING CHAIRMAN. And is there now?

Miss GRIFFIN. Yes, sir.

The ACTING CHAIRMAN. In what building is she located?

Miss GRIFFIN. Toner No. 1.

The ACTING CHAIRMAN. What times of day do you usually go there?

Miss GRIFFIN. Well, I generally go between 3 and 4. Sometimes I go in the morning. I have been going in the morning, but here of late I have had quite a good deal to attend to and I go in the evening about 4 o'clock; sometimes a little later.

The ACTING CHAIRMAN. Did you visit the hospital generally, or simply the building in which your mother is?

Miss GRIFFIN. Simply the building in which my mother was.

The ACTING CHAIRMAN. How many patients are in that building, or have been, in a general way, since you have been going out there?

Miss GRIFFIN. Well, I think from about 16 to 26.

The ACTING CHAIRMAN. And how many attendants are there, if you know?

Miss GRIFFIN. Well, there have been 4 in the daytime and 2 at night. Sometimes there were only 1. For about six or eight months there were 1 attendant there.

The ACTING CHAIRMAN. Did you ever witness anything there on the part of attendants toward the patients that was cruel?

Miss GRIFFIN. Sometimes I have seen them put their hands over their mouths, and I have seen them slap patients, but they did it, they said, in fun. They did not mean what they did.

The ACTING CHAIRMAN. Well, just describe it. Did you see, for instance, the putting of the hand to the mouth?

Miss GRIFFIN. They just placed it over the mouth this way [illustrating].

The ACTING CHAIRMAN. Violently, or otherwise?

Miss GRIFFIN. No; just in this manner [illustrating].

The ACTING CHAIRMAN. How frequently did you see that?

Miss GRIFFIN. I saw it about three or four times.

The ACTING CHAIRMAN. Did you ever see them strike any patient?

Miss GRIFFIN. No, sir; I have never seen them do that.

The ACTING CHAIRMAN. If you ever saw anything there, Miss Griffin, that was cruel, just tell it, please.

Miss GRIFFIN. No, sir; I have not seen anything that was really cruel; but I have seen them tied on a bed with a sheet. I think that is cruel. I don't think that ought to be allowed, with a thick sheet tied around the body, and the patient just wriggling this way and that way, to try to get out of it. And I think that was very injurious to the patient. I should not think that ought to be done.

The ACTING CHAIRMAN. Do you know why that was done?

Miss GRIFFIN. To keep the patients in. There were not enough attendants on the ward to take care of the patients, and that is why they were tied in bed. They were afraid of them falling out of bed.

The ACTING CHAIRMAN. Was there anything else that you saw?

Miss GRIFFIN. Yes, sir; I saw an old lady one night. I rescued her from strangling to death.

The ACTING CHAIRMAN. From what?

Miss GRIFFIN. From strangling to death. This sheet was placed around her body to keep her in bed. She was paralyzed, and I went down to the bathroom, and she was hanging by the neck. The sheet was right around her. There was just one attendant there on the ward for all of those patients; and I called the nurse and she came to my assistance, and we both assisted her to the bed.

The ACTING CHAIRMAN. You put her back in bed?

Miss GRIFFIN. Yes, sir. And Mrs. Cook--she is dead now--I also found her with her head down. She had fallen out also. That was because there were not enough attendants on the ward. There was just one on at that time.

The ACTING CHAIRMAN. And it seemed to you there ought to be more people there?

Miss GRIFFIN. Yes, sir; there ought to be more attendants on the wards to see after the patients.

The ACTING CHAIRMAN. But with the attendants that they had there, did you witness anything in the nature of cruelty?

Miss GRIFFIN. No, sir; not otherwise than that.

The ACTING CHAIRMAN. Do you know Mr. Maenche?

Miss GRIFFIN. No, sir; I do not.

The ACTING CHAIRMAN. You are not over about the laundry?

Miss GRIFFIN. No, sir.

The ACTING CHAIRMAN. Or Mr. Satterfield?

Miss GRIFFIN. No, sir; I just go to see to my mother.

The ACTING CHAIRMAN. If there is anything else that you witnessed there, in the treatment of patients and so on, we ought to know it.

Miss GRIFFIN. Yes, sir; I am willing to tell you anything I know that is cruel or otherwise. I do not want to tell anything but the truth; and I have not told anything but what is the truth.

The ACTING CHAIRMAN. Have you some knowledge that you have not told us?

Miss GRIFFIN. No, sir; not a bit.

TESTIMONY OF CARRIE ELIZABETH PROCTOR.

CARRIE ELIZABETH PROCTOR, being duly sworn, was examined and testified as follows:

The ACTING CHAIRMAN. Where do you live?

Mrs. PROCTOR. I live at Congress Heights.

The ACTING CHAIRMAN. Are you married?

Mrs. PROCTOR. Yes, sir.

The ACTING CHAIRMAN. How long have you been a resident of Washington?

Mrs. PROCTOR. Pretty nigh fifty years.

The ACTING CHAIRMAN. Were you ever employed out at the hospital as an attendant?

Mrs. PROCTOR. At the hospital?

The ACTING CHAIRMAN. Yes.

Mrs. PROCTOR. I worked over there going into six years.

The ACTING CHAIRMAN. Are you working there now?

Mrs. PROCTOR. No, sir.

The ACTING CHAIRMAN. When did you quit?

Mrs. PROCTOR. I quit the last of March.

The ACTING CHAIRMAN. Of this year?

Mrs. PROCTOR. Yes, sir.

The ACTING CHAIRMAN. You were there nearly six years up to that time?

Mrs. PROCTOR. Yes, sir.

The ACTING CHAIRMAN. Was your service continuous from the time you began there?

Mrs. PROCTOR. Yes, sir.

The ACTING CHAIRMAN. Up to the time you quit?

Mrs. PROCTOR. Yes, sir.

The ACTING CHAIRMAN. Whereabouts did you work, and what was your duty there?

Mrs. PROCTOR. I worked in the laundry, down in the basement. I done the washing by hand.

The ACTING CHAIRMAN. Who was the foreman?

Mrs. PROCTOR. Mr. Maenche was supposed to be foreman over me.

The ACTING CHAIRMAN. Was Mr. Satterfield there?

Mrs. PROCTOR. Yes, sir; he worked up on the next floor.

The ACTING CHAIRMAN. What time did you go to work?

Mrs. PROCTOR. We went to work at quarter past 7 in the morning, and we stopped at 12 and went to dinner; and we went to work at quarter past 1 in the day.

The ACTING CHAIRMAN. How frequently would you see Mr. Maenche?

Mrs. PROCTOR. Well, I would see him sometimes three or four times through the day, when I would go upstairs to take anything—to take the clothes, or in passing.

The ACTING CHAIRMAN. How frequently did you see Satterfield?

Mrs. PROCTOR. Very often. I couldn't tell exactly the number of times, but whenever I went upstairs, or very often he would be down in the basement on days that were sorting days; he would be down in the basement.

The ACTING CHAIRMAN. Did you ever see him drunk there, on duty?

Mrs. PROCTOR. Who?

The ACTING CHAIRMAN. Either Satterfield or Maenche.

Mrs. PROCTOR. I never saw Mr. Satterfield drunk; but I saw Mr. Maenche intoxicated from liquors.

The ACTING CHAIRMAN. When was that, if you can tell?

Mrs. PROCTOR. I couldn't exact tell you the day. Of course, I knew he was intoxicated overnight, and then, of course, the next day he wasn't able to attend to his duty. He was setting around, asleep.

The ACTING CHAIRMAN. Did you see him the night before when he was drunk?

Mrs. PROCTOR. Yes, sir; I did, on the car.

The ACTING CHAIRMAN. What time was it when you saw him?

Mrs. PROCTOR. What time of night? About between 11 and 12. I was coming from my auxiliary meeting, over to St. Cyprian's.

The ACTING CHAIRMAN. Was he on duty then?

Mrs. PROCTOR. No; of course he wasn't on duty when he was on the car. He was on the car then, coming in.

The ACTING CHAIRMAN. From the city, do you mean?

Mrs. PROCTOR. Yes, sir; he was going in. He left me on the car to go in the building at the gate. He got off at the gate and went in the building.

The ACTING CHAIRMAN. And he was drunk?

Mrs. PROCTOR. He was.

The ACTING CHAIRMAN. Did you ever see him drunk at any other time?

Mrs. PROCTOR. I saw him drunk twice on the car at night, twice; but I couldn't say I ever saw him drunk inside; but of course he felt bad, I suppose, from drinking overnight, and of course he wasn't able to attend to his duty the next day.

The ACTING CHAIRMAN. Now, there in the laundry during the time you were there, what did you ever observe of cruel treatment of patients by the attendants?

Mrs. PROCTOR. Well, I saw Harry Satterfield take a patient in his collar and jam him up against the side of the wall, and chucked him up, and looked around as if he intended he would strike him and looked around to see if anyone else was looking; as if he was looking to see if anyone would come and catch him at it. He chucked him and jammed him up against the wall.

The ACTING CHAIRMAN. Why was he afraid of anyone catching him?

Mrs. PROCTOR. I couldn't tell you why he was afraid. He knew he wasn't doing right, I suppose, why that he did it; but I can't tell you why.

The ACTING CHAIRMAN. Who was that patient?

Mrs. PROCTOR. I couldn't tell you the patient's name, nary a bit. I was up there, taking up socks. That is the way I came to see it; but I didn't work up on that floor regular, you see. I went up to carry socks, and saw that as I was up there.

The ACTING CHAIRMAN. Did he choke him?

Mrs. PROCTOR. He had him in the collar here [indicating], and just chucked him like that [indicating].

The ACTING CHAIRMAN. This way [indicating]?

Mrs. PROCTOR. No; just this way [indicating]; having this hand right in here, so [indicating], and just jammed him right up against the hard wall.

The ACTING CHAIRMAN. Violently?

Mrs. PROCTOR. Yes; he did; and then he hauled back with his hand for to hit him, and he looked around the room as if he looked to see if anyone would catch him at it.

The ACTING CHAIRMAN. He acted as though it would not do to be caught at that, did he?

Mrs. PROCTOR. Yes, sir; I suppose so. It must have meant that; I don't know what else.

The ACTING CHAIRMAN. You do not know the name of that patient?

Mrs. PROCTOR. No, sir; I don't.

The ACTING CHAIRMAN. Do you know about when that was?

Mrs. PROCTOR. Of course I knew; I saw that done, but I can't tell the date and day and moment, of course. I saw it done.

The ACTING CHAIRMAN. Can you tell the year?

Mrs. PROCTOR. It was year before last; year before last that I saw that done.

The ACTING CHAIRMAN. 1904?

Mrs. PROCTOR. Yes, sir; year before last when I saw that done.

The ACTING CHAIRMAN. Did you ever see Satterfield mistreat any other patient?

Mrs. PROCTOR. No; I never saw him illtreat but that one, really, to call it illtreat. And that was that day; of course, I saw that.

The ACTING CHAIRMAN. Did you ever see Maenche mistreat a patient?

Mrs. PROCTOR. No; I never. I never saw him illtreat none of the patients. I never did. I have saw him box and play and fool with them, but I never saw him illtreat one. No; I never.

TESTIMONY OF JOSEPH KLUG.

JOSEPH KLUG, being duly sworn, was examined, and testified as follows:

The ACTING CHAIRMAN. What is your name?

Mr. KLUG. Joseph Klug.

The ACTING CHAIRMAN. How old are you?

Mr. KLUG. Thirty-five

The ACTING CHAIRMAN. Where do you live?

Mr. KLUG. I live in Anacostia; at 120 Jackson street, Anacostia.

The ACTING CHAIRMAN. Have you lived here all your life?

Mr. KLUG. All my life. I was born and raised in Washington.

The ACTING CHAIRMAN. Were you ever employed out at St. Elizabeth's Hospital?

Mr. KLUG. I have been there for 17 years, sir.

The ACTING CHAIRMAN. Are you employed there now?

Mr. KLUG. Yes, sir.

The ACTING CHAIRMAN. What has been your employment?

Mr. KLUG. Well, I have been on the wards fourteen years and nine months. I left the wards this coming July—the 15th of July—two years ago, and I am in the bakery at present, working at my trade. I went there at first at my trade, and worked, I believe, about six months.

The ACTING CHAIRMAN. In the bakery?

Mr. KLUG. Yes, sir. Then I quit it and went to work at nursing.

The ACTING CHAIRMAN. During the whole time you were in the bakery—when you first went there and since you have been in it more recently—has anything occurred there in the way of cruel treatment of any kind?

Mr. KLUG. Not to my knowledge, sir.

The ACTING CHAIRMAN. Did you ever see anything of the kind?

Mr. KLUG. Not to my knowledge, sir.

The ACTING CHAIRMAN. Did you ever hear of anything?

Mr. KLUG. Not to my knowledge.

The ACTING CHAIRMAN. Have you any patients working in the bakery?

Mr. KLUG. We have two.

The ACTING CHAIRMAN. Who are they?

Mr. KLUG. One by the name of John Connors and the other by the name of William Widdick.

The ACTING CHAIRMAN. If you saw anything at work there in the bakery please state it.

Mr. KLUG. I have never seen anything, sir.

The ACTING CHAIRMAN. You worked in the wards?

Mr. KLUG. Fourteen years and nine months.

The ACTING CHAIRMAN. What ward?

Mr. KLUG. I had charge of the infirmary ward eleven years.

The ACTING CHAIRMAN. How many patients were in there during that time?

Mr. KLUG. Well, sometimes they varied from 32 patients down to—the lowest I have ever had was 23.

The ACTING CHAIRMAN. Did you have any assistants?

Mr. KLUG. I had one—two. We had a mute on the ward. He did the printing and looked after the dining room—and myself, and of course I have had dozens of assistants.

The ACTING CHAIRMAN. I mean at the same time how many would you have?

Mr. KLUG. Two.

The ACTING CHAIRMAN. Now, sir, during that time what did you witness there in the way of mistreatment of patients?

Mr. KLUG. I have never in my time there mistreated any patient. I never had occasion to do so. I have had them under my care that I have known all my life, born and raised in the neighborhood, that have been there. I had one patient—a little boy named Deegan—eight years old when he came under my care, and when he came there his people couldn't manage him. The onliest thing we could do—he would spit and kick and bite, and anything he could get, no difference what it was, he would throw it—so we had a little jacket—a canvas jacket—made for him, to stop him. Just at intervals, when he would get these spells on him, we would put him in it and keep him for an hour or so, until his temper wore off, and then take it off.

The ACTING CHAIRMAN. What did you do that for?

Mr. KLUG. I had orders to do that. Doctor Godding was there at the time, and when Doctor White came he ordered me to give up the jacket, and I have given it up and never used it since.

The ACTING CHAIRMAN. On that same boy?

Mr. KLUG. Yes, sir.

The ACTING CHAIRMAN. Is he there still?

Mr. KLUG. Yes.

The ACTING CHAIRMAN. In doing that did it hurt the patient?

Mr. KLUG. No, sir; not to my knowledge. I don't think so. I didn't bound him to ill treat him or abuse him, but it is simply to keep him quiet and keep him from hurting himself. He would have a habit, if you didn't do that, that he would throw his hand in his mouth and bite himself, or kick anybody, or throw anything he came in contact with.

The ACTING CHAIRMAN. Was this done to restrain him?

Mr. KLUG. Yes, sir; from doing these bad things. And after his temper wore off I would take him out and let him out until he got unruly again.

The ACTING CHAIRMAN. Could you tell when these tantrums were coming on?

Mr. KLUG. Yes, sir; about every two or three weeks he would get those spells.

The ACTING CHAIRMAN. Has any other instance—

Mr. KLUG. No, sir; that is the onliest that I have had.

The ACTING CHAIRMAN. Did you ever see any other attendant there maltreat a patient?

Mr. KLUG. Not to my knowledge, I have not.

The ACTING CHAIRMAN. Have you any knowledge that you are afraid to divulge here?

Mr. KLUG. No, sir; not at all, sir.

The ACTING CHAIRMAN. I mean, are you afraid of your position or anything of that kind?

Mr. KLUG. No, sir; I am not.

The ACTING CHAIRMAN. Have you told us the whole truth, all you know about it?

Mr. KLUG. So help me God.

The ACTING CHAIRMAN. Did you see or report anybody that you suspected was guilty of maltreatment of patients?

Mr. KLUG. No, sir.

The ACTING CHAIRMAN. You yourself did not believe in maltreatment, did you?

Mr. KLUG. No, sir.

The ACTING CHAIRMAN. Would you have tolerated it in anyone else if you had seen it?

Mr. KLUG. I would not have allowed anyone else; no, sir; I would not.

Mr. HAY. How often did Doctor White go through the ward?

Mr. KLUG. Well, generally on a Sunday Doctor White came around occasionally. I couldn't really say exactly how often he came, but off and on Doctor White came on occasionally—as often as the rest of them.

Mr. HAY. He came as often as the rest?

Mr. KLUG. Yes.

Mr. HAY. As often as the physicians?

Mr. KLUG. I speak of the superintendents on Sunday.

Mr. HAY. As often as the superintendents who preceded him?

Mr. KLUG. Yes, sir.

Mr. HAY. How often did they go through?

Mr. KLUG. Well, I couldn't say, it has been so long. Doctor Richardson sometimes would be one week he would miss, and two weeks he wouldn't come through; and so with Doctor White.

Mr. HAY. You say now you are employed there?

Mr. KLUG. I am, sir.

Mr. HAY. You are employed where?

Mr. KLUG. In the bakery.

Mr. HAY. How often does Doctor White go through that?

Mr. KLUG. Well, I haven't seen the doctor down there for—I guess it has been a couple of months. He has no occasion to. We have a class of men there that do our duty, and when we do our duty we go home. I don't think Doctor White or anyone else has any occasion to call there. There was a lot of young men they had in former years that have been there right along.

Mr. BARCHFELD. You do not live in the institution?

Mr. KLUG. No, sir; I have a home on Jackson street. Some nights I stay there.

Mr. BARCHFELD. How long do you work? What are your hours?

Mr. KLUG. From 6 in the morning, and we have to stay until 4.

We get through at 3 or half past 2 in the evening; we get through making up, but we have to wait until everything is baked off.

The ACTING CHAIRMAN. What is the bakery? You have bread and biscuit?

Mr. KLUG. On Monday we have about 1,200 loaves of bread and coffee cake for supper. Next day they have bread for breakfast and bread for dinner, and either finger rolls or buns or rolls for supper on Tuesday. On Wednesday we have about 1,200 again, and they have either ginger bread for supper, or sometimes they have buns. We vary around that way—sometimes doughnuts or currant buns.

The ACTING CHAIRMAN. In preparing that what care do you take to get good bread and buns, and whatever you bake there?

Mr. KLUG. What care?

The ACTING CHAIRMAN. Yes.

Mr. KLUG. How do you mean?

The ACTING CHAIRMAN. Do you try to get good bread?

Mr. KLUG. We try to get the best results out of the stuff we get.

The ACTING CHAIRMAN. What kind of stuff do you get out of which to prepare it?

Mr. KLUG. We get good bread, as good as you can buy in town; as good as anybody puts on the table.

The ACTING CHAIRMAN. Do you try to bake your bread right?

Mr. KLUG. Yes, sir.

The ACTING CHAIRMAN. And have it palatable and good?

Mr. KLUG. Yes, sir.

The ACTING CHAIRMAN. Is that true of the cakes and whatever you bake there?

Mr. KLUG. Yes, sir.

The ACTING CHAIRMAN. What kind of an oven have you there?

Mr. KLUG. We have a reel oven that holds 564 loaves at once.

The ACTING CHAIRMAN. A question has ben suggested to me: Do you know Mr. Maenche?

Mr. KLUG. Yes, sir.

The ACTING CHAIRMAN. Did you ever see him drunk over there?

Mr. KLUG. Well, I have never in my life seen him drunk, judge, your honor. I have had occasionally a little trouble with Mr. Maenche—on the 22d of February, in the evening, outside of the gate. It seemed like he and a dorky had some words on a car, and the dorky came back and said something to him. I didn't know at the time what it was. Mr. Maenche came back to me, and wanted to know what the man said. I said: "I don't know what your friend said. You had better chase the car and find out." With that he said: "Did he call me Maenche?" I said "Yes." He said, "You are a damn liar." With that I smacked him in the mouth, and he threatened to report me.

The ACTING CHAIRMAN. Was he drunk?

Mr. KLUG. I couldn't say. He didn't act like he had good sense. I don't know. I didn't see him drink anything. I don't know. I couldn't swear to it.

The ACTING CHAIRMAN. Did you see him drunk at any other time?

Mr. KLUG. Never in my life.

The ACTING CHAIRMAN. Do you know Satterfield?

Mr. KLAG. I knew him by sight. I didn't know him personally. I didn't mix up with people there. I keep to myself. When my work is done I get out since I have been in the bakery. I have a home, and have been married fifteen years.

TESTIMONY OF WILSON TYLER.

WILSON TYLER, being duly sworn, was examined, and testified as follows:

The ACTING CHAIRMAN. Where do you live, Tyler?

Mr. TYLER. I live on Stanton avenue, in Anacostia.

The ACTING CHAIRMAN. Are you employed out at the hospital now?

Mr. TYLER. Yes, sir.

The ACTING CHAIRMAN. What is your employment?

Mr. TYLER. Why, I am a sorter of clothes in the basement.

The ACTING CHAIRMAN. In the laundry?

Mr. TYLER. Yes, sir.

The ACTING CHAIRMAN. How long have you been employed there?

Mr. TYLER. Why, since August, 1900.

The ACTING CHAIRMAN. You have been in the laundry all the time?

Mr. TYLER. Yes, sir.

The ACTING CHAIRMAN. Do you know Satterfield?

Mr. TYLER. Yes, sir; I knew him by working with him.

The ACTING CHAIRMAN. How frequently would you see him?

Mr. TYLER. Well, I would see him every day.

The ACTING CHAIRMAN. How frequently during the day; once or how frequently?

Mr. TYLER. Quite frequently.

The ACTING CHAIRMAN. Did you ever see him drunk?

Mr. TYLER. No, sir.

The ACTING CHAIRMAN. What?

Mr. TYLER. No, sir; not to my knowledge.

The ACTING CHAIRMAN. Do you know Maenche?

Mr. TYLER. Yes, sir.

The ACTING CHAIRMAN. How frequently would you see him?

Mr. TYLER. Why, I never saw him drunk, to my knowledge.

The ACTING CHAIRMAN. I did not ask you that. How frequently would you see him out there?

Mr. TYLER. See Mr. Maenche? I see him most every day.

The ACTING CHAIRMAN. Did you ever see him drunk?

Mr. TYLER. Not to my knowledge.

The ACTING CHAIRMAN. Now, sir, since you have been employed there in that laundry, what do you know about patients being mistreated? Did you ever see anything of that kind?

Mr. TYLER. No, sir.

The ACTING CHAIRMAN. Or abused?

Mr. TYLER. No, sir.

The ACTING CHAIRMAN. What?

Mr. TYLER. No, sir; there is no patients works on that floor where I work. I work on the basement.

The ACTING CHAIRMAN. There are no patients down there?

Mr. TYLER. No, sir.

The ACTING CHAIRMAN. Would you be above sometimes?

Mr. TYLER. I would be above occasionally. I never saw any of it.

The ACTING CHAIRMAN. Are you keeping back something, something you know that you do not want to tell?

Mr. TYLER. No, sir.

The ACTING CHAIRMAN. Do you know anything about a couple of ladies out there making affidavit, said to be at the instance of Mr. Maenche?

Mr. TYLER. No, sir.

The ACTING CHAIRMAN. Do you know Winnie Fraser?

Mr. TYLER. Yes, sir.

The ACTING CHAIRMAN. And Emma Wilson?

Mr. TYLER. No, sir.

The ACTING CHAIRMAN. Where is Winnie Fraser?

Mr. TYLER. She was in the laundry when I came away.

The ACTING CHAIRMAN. You do not know such a person as Emma Wilson?

Mr. TYLER. No, sir.

TESTIMONY OF PHILIP MAUS.

PHILIP MAUS, being duly sworn, was examined, and testified as follows:

The ACTING CHAIRMAN. How old are you?

Mr. MAUS. Eighteen.

The ACTING CHAIRMAN. Are you employed at the hospital now?

Mr. MAUS. I am employed in the laundry; yes, sir.

The ACTING CHAIRMAN. How long have you been there?

Mr. MAUS. Since March 1.

The ACTING CHAIRMAN. Of this year?

Mr. MAUS. Yes, sir.

The ACTING CHAIRMAN. Who is your foreman?

Mr. MAUS. Mr. Maenche.

The ACTING CHAIRMAN. Since you have been there, have you any patients working in the laundry?

Mr. MAUS. Yes, sir.

The ACTING CHAIRMAN. How many?

Mr. MAUS. I believe there is 16. I am not sure.

Mr. HAY. How many?

Mr. MAUS. Fifteen.

The ACTING CHAIRMAN. What have you observed since you have been there by way of mistreatment of these patients?

Mr. MAUS. I haven't seen any mistreatment since I have been there.

The ACTING CHAIRMAN. Have you, yourself, mistreated any of them?

Mr. MAUS. No, sir.

The ACTING CHAIRMAN. Have you seen any other employee mistreat them?

Mr. MAUS. No, sir.

The ACTING CHAIRMAN. Did you ever strike anybody?

Mr. MAUS. I never struck a patient.

The ACTING CHAIRMAN. Did you see any other employee strike, or choke, or take hold of a patient out there?

Mr. MAUS. No, sir.

The ACTING CHAIRMAN. You would tell us if you had seen that, would you not?

Mr. MAUS. I certainly would tell you if I seen it.

The ACTING CHAIRMAN. Have you seen anyone out there mistreat the patients?

Mr. MAUS. No, sir; I am not around enough.

The ACTING CHAIRMAN. Mr. Maenche is your foreman?

Mr. MAUS. Yes, sir.

The ACTING CHAIRMAN. Have you seen him drunk since you have been out there?

Mr. MAUS. No, sir; not as I know of. He has been a perfect gentleman ever since I have been there.

The ACTING CHAIRMAN. How is that?

Mr. MAUS. He has been a gentleman since I have been there, as far as I know.

The ACTING CHAIRMAN. Is he not in the habit of swearing around that laundry at the men and women?

Mr. MAUS. Not as I know. He never cussed any of the men as I know of.

The ACTING CHAIRMAN. You would be there and hear it, would you not?

Mr. MAUS. No; I am not; no, sir. I am working in the wash-house, and I couldn't hear up in the laundry part.

The ACTING CHAIRMAN. But I mean down in the part you are in.

Mr. MAUS. No, sir.

The ACTING CHAIRMAN. Is there anything of that kind?

Mr. MAUS. No cussing down in that part that I heard of.

The ACTING CHAIRMAN. When do you go to work—what time?

Mr. MAUS. Quarter of seven in the morning.

The ACTING CHAIRMAN. When do you quit?

Mr. MAUS. Twelve o'clock.

The ACTING CHAIRMAN. Do you live in the institution?

Mr. MAUS. Yes, sir.

The ACTING CHAIRMAN. Where do you put in your nights?

Mr. MAUS. In the institution, in the upstairs of the bakery.

The ACTING CHAIRMAN. You go around, after your working hours, through the institution some, do you not?

Mr. MAUS. No, sir; I never go through the institution. I haven't been through it since I have been there. I don't know whether I will go through it or not.

Mr. BARCHFELD. What is your salary out there? What wages do they pay you?

Mr. MAUS. Twenty dollars a month.

Mr. WALLACE. You said you had not been out there long enough to observe any abuse by any other person.

Mr. MAUS. No, sir; I have only been there since March 1.

Mr. WALLACE. If you had been there longer, would it have given you better opportunities to have seen that?

Mr. MAUS. I don't know.

Mr. WALLACE. It seems like you might have a period attached there somewhere.

Mr. MAUS. No; I haven't seen any abuse. I have only been there two months and seven days.

Mr. WALLACE. You do not know what occurred, then, before you got there?

Mr. MAUS. No, sir.

Mr. WALLACE. Did you know anything about it after you got there?

Mr. MAUS. No, sir.

TESTIMONY OF S. P. BELT.

S. P. BELT, being duly sworn, was examined, and testified as follows:

The ACTING CHAIRMAN. Are you employed out at the hospital?

Mr. BELT. Yes, sir.

The ACTING CHAIRMAN. How long have you been employed there?

Mr. BELT. Since last August 3d. The 3d I went there.

The ACTING CHAIRMAN. What is your employment?

Mr. BELT. Oiler at the new power house.

The ACTING CHAIRMAN. Have you been at that ever since you have been there?

Mr. BELT. Yes, sir.

The ACTING CHAIRMAN. Have you any patients employed in the department where you are?

Mr. BELT. No, sir; except those who haul coal down there.

The ACTING CHAIRMAN. How many are there who haul coal?

Mr. BELT. I suppose eight or ten.

The ACTING CHAIRMAN. How do they haul it?

Mr. BELT. In wheelbarrows.

The ACTING CHAIRMAN. Who is your foreman?

Mr. BELT. Mr. Folsom.

The ACTING CHAIRMAN. Since you have been there what have you observed as to the mistreatment of patients, if anything?

Mr. BELT. Well, I can't say that I have ever saw but one mistreated.

The ACTING CHAIRMAN. Who was that?

Mr. BELT. I don't know.

The ACTING CHAIRMAN. Where was it?

Mr. BELT. Well, I don't know what ward it was in.

The ACTING CHAIRMAN. When was it?

Mr. BELT. Sometime last fall.

The ACTING CHAIRMAN. Well, just describe what it was. Describe the scene as you witnessed it.

Mr. BELT. There was a man—they went off the field where they had them out walking, and after they all got in they went in a little closet after their shoes; and one man got the wrong pair of shoes. That is, he got a small pair of shoes and he had a right large foot. He was a big man. When he came out with the small pair of shoes on the attendant struck him and told him to go back in there and get another pair of shoes.

The ACTING CHAIRMAN. Who was the attendant?

Mr. BELT. I don't know.

The ACTING CHAIRMAN. Have you tried to find out?

Mr. BELT. No, sir; I have not tried to find out.

The ACTING CHAIRMAN. How did he strike him? Just describe that, will you?

Mr. BELT. He struck him on the back of the head, and said: "Go back there and get your shoes."

The ACTING CHAIRMAN. How—with his fist?

Mr. BELT. Yes, sir.

The ACTING CHAIRMAN. His clenched fist?

Mr. BELT. Yes, sir; I think so, sir.

The ACTING CHAIRMAN. Well, illustrate it.

Mr. BELT. He just struck him back of the head and said: "You go back there and get your shoes."

The ACTING CHAIRMAN. Did he knock him down?

Mr. BELT. Oh, no. No, he didn't knock him down.

The ACTING CHAIRMAN. And you can not tell the name of either the patient or the attendant that did it?

Mr. BELT. No, sir.

The ACTING CHAIRMAN. Was there anything said about it at the time?

Mr. BELT. No, sir. Whether he had to do that I don't know.

The ACTING CHAIRMAN. What?

Mr. BELT. Whether he had to do that or not I don't know. He may have just been trying to get the patient to get his shoes. He said at the time he had been telling that fellow often enough about that, or something to that effect. I don't remember what it was.

The ACTING CHAIRMAN. Is there anything else that you ever witnessed out there of that kind?

Mr. BELT. Not that I remember. No, sir; I don't believe there is.

The ACTING CHAIRMAN. Was your attention called to this incident by any of the people in charge out there?

Mr. BELT. Yes, sir.

The ACTING CHAIRMAN. Who?

Mr. BELT. Doctor White.

The ACTING CHAIRMAN. What did he do?

Mr. BELT. He wanted to know where I saw this patient struck, and I told him, but I couldn't tell him where it was.

The ACTING CHAIRMAN. You could not tell either the patient or the attendant who did it?

Mr. BELT. No, sir.

The ACTING CHAIRMAN. Is that it?

Mr. BELT. Yes, sir; because I had not been there more than once, and I didn't know anyone.

Mr. HAY. What do you know about the food out there, Mr. Belt?

Mr. BELT. Food?

Mr. HAY. Yes, sir. Is it good or bad?

Mr. BELT. Well, it suits me all right.

Mr. HAY. How about the coal?

Mr. BELT. Coal? We get very good coal there. Sometimes, of course, it is like all other coal, it will run a little bad for a while.

Mr. HAY. Your name is S. P. Belt, is it not?

Mr. BELT. Yes, sir.

Mr. HAY. Did you ever give an affidavit in regard to this matter?

Mr. BELT. I did, to Doctor Emmons.

Mr. HAY. Did you complain in that affidavit that the food was bad?

Mr. BELT. No, sir.

Mr. HAY. You did not?

Mr. BELT. No, sir.

The ACTING CHAIRMAN. Did you get any directions from Doctor White when he sent for you, by way of trying to find out who the person was that struck the patient?

Mr. BELT. Well, he asked me, and so did the assistant superintendent over there.

The ACTING CHAIRMAN. When was this?

Mr. BELT. It was about September, or maybe in October. I expect it was in October.

The ACTING CHAIRMAN. Last year?

Mr. BELT. Yes, sir.

Mr. HAY. Do you mean you saw this thing happen in October?

Mr. BELT. I think so; yes, sir.

Mr. HAY. When did Doctor White ask you to find out who it was?

Mr. BELT. I think it was before Christmas sometime.

Mr. HAY. Sometime before Christmas.

Mr. BELT. Yes, sir.

Mr. HAY. Had you informed him in regard to it?

Mr. BELT. No, sir.

Mr. HAY. Do you know how he heard about it?

Mr. BELT. I think he heard it through the chief engineer. I was telling him.

Mr. HAY. You told the chief engineer?

Mr. BELT. Yes, sir.

Mr. HAY. And he told Doctor White?

Mr. BELT. I suppose so. I don't know what else.

The ACTING CHAIRMAN. Do you know anything that has been happening up in the laundry?

Mr. BELT. No, sir; I don't know anything about that.

Mr. WALLACE. May I ask the witness a question?

The ACTING CHAIRMAN. Certainly, Mr. Wallace.

Mr. WALLACE. Do you know anything about those parties who had the mêlée?

Mr. BELT. Sir?

Mr. WALLACE. The two parties who had the difficulty. Do you know anything about where they are now?

Mr. BELT. Who?

Mr. WALLACE. You say you saw one man hit another back of the head with his fist?

Mr. BELT. Yes.

Mr. WALLACE. Do you know where those two parties are?

Mr. BELT. No, sir; I do not.

Mr. WALLACE. You do not know whether they are over there at the institution or not?

Mr. BELT. No; I don't know whether they are there or not.

Mr. WALLACE. Could you not find out?

Mr. BELT. I don't know as I could. I remember the building it was in, but I don't know which floor it was.

The committee (at 3.15 o'clock p. m.) adjourned until Wednesday, May 9, 1906, at 10 o'clock a. m.

HOUSE OF REPRESENTATIVES,
Washington, D. C., May 9, 1906—10 o'clock a. m.

The committee met pursuant to adjournment.

Present: Messrs. Olcott (chairman), Smyser, Barchfeld, Hay, and Wallace. Also Dr. William A. White, Stuart McNamara, F. A. Fenning, Richard T. Evans, Dr. F. M. Gunnell, Doctor Reyburn, and others.

TESTIMONY OF MISS CLARA SCHATZ.

Miss CLARA SCHATZ, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. Are you Miss Clara Schatz?

Miss SCHATZ. Yes, sir.

The CHAIRMAN. And are you employed now in the United States Hospital for the Insane?

Miss SCHATZ. Yes, sir.

The CHAIRMAN. In what position?

Miss SCHATZ. In the laundry.

The CHAIRMAN. How long have you been there?

Miss SCHATZ. I will be there two years the 3d of August.

The CHAIRMAN. Do you know Maenche, the foreman of the laundry room?

Miss SCHATZ. Yes, sir.

The CHAIRMAN. What sort of a man is he?

Miss SCHATZ. Well, he is an ordinary man, as far as I know.

The CHAIRMAN. Is he a good foreman, as far as you know?

Miss SCHATZ. Yes, sir.

The CHAIRMAN. Is he generally attentive to his duties?

Miss SCHATZ. Yes, sir.

The CHAIRMAN. Did you ever see him drunk?

Miss SCHATZ. No, sir.

The CHAIRMAN. Is he always on hand during the time he is supposed to be on duty? That is, so far as you know?

Miss SCHATZ. As far as I know.

The CHAIRMAN. You see him every day, do you not?

Miss SCHATZ. Yes, sir.

The CHAIRMAN. What time are you at work in the laundry?

Miss SCHATZ. At a quarter after 7 in the morning.

The CHAIRMAN. What time do you stop?

Miss SCHATZ. Half past 4.

The CHAIRMAN. One of the witnesses testified that Maenche had used some improper language in talking to you. Is that so?

Miss SCHATZ. No, sir.

The CHAIRMAN. He never did?

Miss SCHATZ. No, sir.

The CHAIRMAN. He never had any unpleasant talk with you at all?

Miss SCHATZ. No, sir.

TESTIMONY OF MISS OMIE CADELL.

Miss OMIE CADELL, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Your name is Carrie Cadell?

Miss CADELL. Omie Cadell; O-m-i-e.

The CHAIRMAN. Are you employed in the laundry in the hospital?

Miss CADELL. Yes, sir.

The CHAIRMAN. How long have you been in such employment?

Miss CADELL. Five years this coming April.

The CHAIRMAN. Do you know Maenche, the foreman?

Miss CADELL. Yes, sir.

The CHAIRMAN. Has he been there as long as you have?

Miss CADELL. Yes, sir; some time before.

The CHAIRMAN. But he was there when you went there?

Miss CADELL. Yes, sir.

The CHAIRMAN. Did you ever see him drunk?

Miss CADELL. No, sir.

The CHAIRMAN. Did you ever see him when he looked as if he had been drinking, or any thing of that kind, so that it was noticeable?

Miss CADELL. No, sir.

The CHAIRMAN. Was he, as far as you know, generally attentive to his duties as foreman, or was he not?

Miss CADELL. He was, always.

The CHAIRMAN. Did you ever see him maltreat any of the inmates?

Miss CADELL. No, sir.

The CHAIRMAN. How many patients are there employed where you are employed?

Miss CADELL. Well, I couldn't say. I don't know. There are quite a number.

The CHAIRMAN. Are there two or three of them?

Miss CADELL. Sir?

The CHAIRMAN. Are there two or three of them in the room where you are?

Miss CADELL. Yes, sir; in the room where I am there are female patients. There are no male patients.

The CHAIRMAN. Was Maenche's treatment of you always respectful and proper?

Miss CADELL. He certainly has; yes, sir.

The CHAIRMAN. There never was any unpleasant conversation, or unpleasant remarks to you, in any way?

Miss CADELL. No, sir.

Mr. HAY. Have you talked with anybody about the evidence you were to give here to-day before you came out here?

Miss CADELL. No, sir.

TESTIMONY OF MISS KATIE BUTLER.

Miss KATIE BUTLER, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Your name is Katie Butler?

Miss BUTLER. Yes, sir.

The CHAIRMAN. You are employed in the laundry of the hospital?

Miss BUTLER. Yes.

The CHAIRMAN. How long have you been there?

Miss BUTLER. Since July 6, 1905.

The CHAIRMAN. What room in the laundry are you in?

Miss BUTLER. What room?

The CHAIRMAN. Yes; are there not several rooms in the laundry department?

Miss BUTLER. Yes; in the upper room.

The CHAIRMAN. The room on the upper floor?

Miss BUTLER. Yes.

The CHAIRMAN. There are two floors where the laundry is?

Miss BUTLER. Yes.

The CHAIRMAN. Are there male patients employed in the room you are in?

Miss BUTLER. There is only one.

The CHAIRMAN. What does he do?

Miss BUTLER. He helps to fold clothes.

The CHAIRMAN. Are you in what they call the folding room in the laundry?

Miss BUTLER. No; I am in the ironing room.

The CHAIRMAN. Do you know Maenche, the foreman of the laundry?

Miss BUTLER. Yes.

The CHAIRMAN. Did you ever see him drunk?

Miss BUTLER. No.

The CHAIRMAN. Is his treatment of the people under him respectful and proper? Does he treat you properly?

Miss BUTLER. He certainly does.

The CHAIRMAN. Did he ever make any remarks to you of an unpleasant character, in any way?

Miss BUTLER. No; he has not.

The CHAIRMAN. As far as you know, Mr. Maenche generally attends to his duties?

Miss BUTLER. Yes, sir.

The CHAIRMAN. And you never saw him drunk?

Miss BUTLER. I never saw him drunk; no, sir.

Mr. BARCHFELD. He is never abusive, and does not use foul or indecent language in the presence of any of you ladies?

Miss BUTLER. I have never heard him use it.

TESTIMONY OF S. DAWES SHUSTER.

S. DAWES SHUSTER, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Mr. Shuster, where do you reside?

Mr. SHUSTER. In the District of Columbia. I was born and raised here.

The CHAIRMAN. Are you in business now?

Mr. SHUSTER. Not at present; no, sir. I used to be in the dry-goods business.

The CHAIRMAN. Were you ever a patient at St. Elizabeth hospital?

Mr. SHUSTER. I was. I went there the 18th of June, I think it was, 1904.

The CHAIRMAN. How long did you remain there?

Mr. SHUSTER. I remained there until somewhere between, probably, the 6th and the 15th of November, 1906. I don't know the date I left.

The CHAIRMAN. You mean November, 1905, do you not?

Mr. SHUSTER. I mean 1905. I beg your pardon; yes, sir.

The CHAIRMAN. Why did you go to St. Elizabeth's?

Mr. SHUSTER. Well, sir, I was in the Columbian University Hospital up on H street, between 13th and 14th, and I had a doctor—Doctor Bailey. I was suffering with nervous prostration, and my brother and the doctor and another party persuaded me to go there. They said that I could get treatment there—electrical treatment—that I could not get anywhere else. I consented to go. They got a permit out, from what I understood afterwards. They got a permit out, and got me into the institution. They never said I would have to be taken to court and adjudged insane. That was never intimated to me.

The CHAIRMAN. You say that was at the suggestion of your brother?

Mr. SHUSTER. My brother and Doctor Bailey.

The CHAIRMAN. He was your physician?

Mr. SHUSTER. Yes, sir; and he said he would pay attention to me and come over and see that I got a room and got treatment that he couldn't give me. He said I would go there and stay six weeks or two months and come out all right; and when I got there they wouldn't let me go. I used to beg and beg.

The CHAIRMAN. What ward did you stay in?

Mr. SHUSTER. When I was first taken there I went to Oak Ward. Then I suppose I was in Oak Ward maybe a week or ten days when they transferred me to the Toner Building.

The CHAIRMAN. What was your experience with the attendants of the hospital?

Mr. SHUSTER. I think, collectively, they were the worst I ever saw in my life, or even could imagine. I never saw any before.

The CHAIRMAN. How many were there that you came in contact with, do you know?

Mr. SHUSTER. Well, I don't know. I came in contact with a good many of them.

The CHAIRMAN. Do you know the names of any of them?

Mr. SHUSTER. Yes, sir; I know one in particular. I remember him. George—what is his name—George Thorn.

The CHAIRMAN. George Thorn.

Mr. SHUSTER. Yes, sir.

The CHAIRMAN. Was he one of the attendants in Oak Hall when you were there?

Mr. SHUSTER. No, sir; he was not.

The CHAIRMAN. He was in the other place?

Mr. SHUSTER. He was in the B. B. Building. I was there two or three weeks, or quite some time; and I was in ward 2 and ward 4, I think—I don't remember exactly. But his brother was an attendant—

The CHAIRMAN. Wait a moment. I want to get through one at a time, if you please. Was his treatment of you rough?

Mr. SHUSTER. Very rough and uncouth at all times.

The CHAIRMAN. What did he do to you; did he offer you physical violence?

Mr. SHUSTER. When I had a little stroke of paralysis over there, I was lying in bed one morning and he came in and demanded that I should get up out of bed. I told him I was feeling so bad and sick that I wanted to lay there. He said, "You get out of that bed;"

and I have got a little temper of my own, and I said "No." He grabbed me by the leg and pulled me partly out of bed, and I begged him to let me go.

On another occasion he came to me. I got up in the morning, and I was walking up the hall there, and he hollered "Shuster, you get away from here." I said "When you speak to me use more respect. I am respectful to you. I call you Mr. Thorn, and you call me Mr. Shuster." He says "Call you what?" I says "Mr. Shuster." He grabbed me by the night shirt and raised his hand up, and damned me, and did all but hit me. There was a sailor there at the time. "You, mister; you"—he went on that way; and the sailor said "Mr. Shuster, that is awful." He said "If he had struck you I would have brained him."

The CHAIRMAN. Was the sailor one of the patients?

Mr. SHUSTER. Yes, sir. I forget his name.

The CHAIRMAN. Was there any other attendant that you remember?

Mr. SHUSTER. Yes; his brother was down in Oak ward.

The CHAIRMAN. Did he do anything to you?

Mr. SHUSTER. Yes, sir. He treated me uncouthly.

The CHAIRMAN. Did he ever hit you?

Mr. SHUSTER. No, sir; but he has always treated me uncouthly, and damned me when I came in. I always had a parole there.

The CHAIRMAN. Did you ever tell any of the doctors about this treatment?

Mr. SHUSTER. I never did. I told the supervisor, Mr. Burch, and he said that I ought to speak to the doctor about it. I thought he was the one. He was there for the purpose of looking after those things, to see that they went straight.

The CHAIRMAN. What doctor was attending you personally; which one of the doctors?

Mr. SHUSTER. It would depend on which ward.

The CHAIRMAN. At the time this man pulled you out of bed, as you say, and maltreated you?

Mr. SHUSTER. Doctor Stack.

The CHAIRMAN. Did you never complain to him at all?

Mr. SHUSTER. No, sir; I didn't because it seemed that every time Doctor Stack came around this fellow was around, and I had heard the attendant make such threats of what they would do with people that complained of them, and that sort of thing, in the past, that I was intimidated, and I think I had just reason to be afraid from what I had seen and what I had heard about how they put towels around people's neck and give it a twist, and all such stuff as that. I never went out of B. B. or Oak that I wasn't damned when I went out and damned when I came in.

The CHAIRMAN. By this man Thorn?

Mr. SHUSTER. Yes, sir.

The CHAIRMAN. Are there any other people that you complained of except the two Thorn brothers?

Mr. SHUSTER. No; I hardly think so.

The CHAIRMAN. What was the treatment of the doctors toward you and the other patients? How did they treat you?

Mr. SHUSTER. They seemed to treat me all right, except when I would try to talk to Doctor Stack and try to get him to intercede to get me out of there. He would brush me off and walk by. He

finally asked me one day why didn't my oldest brother, who was a lawyer in Washington, come to see me. I tried to explain to him that in the settlement of my mother's and father's estate we had all become at loggerheads, and had not spoken for years, and I hardly expected he would intercede. He said that it was very funny, very funny.

The CHAIRMAN. How about the food at the institution?

Mr. SHUSTER. I think it is the worst ever I ate. I know it is the worst I ever ate. I was sick there in Oak ward when I was taken there. They brought in beans that were not fit for a sick man, broken down with nervous prostration. They are not the ordinary beans you have cooked with pork, but canned beans, and red, about that big [indicating], and pretty near as hard as raw chestnuts. The coffee—I don't think there is a grain of coffee in it. I guess it is made of coffee essence. I have seen big wagon loads come through the grounds there, as large as Knox's wagons, of chicory and such stuff. And there is no such thing as butter. They tell me they have a butterine factory over there, and it is known by the patients there as axle grease. "Pass me the axle grease," they say. And such a thing as an attendant waiting on a patient at the table I never saw done. The patients wait on each other, and some of them are very helpless and some of them are not; and the ones that are not helpless seem to help the ones that are.

Mr. SMYER. Are those the kind of beans that are in ordinary use?

Mr. SHUSTER. I never saw them any place in my life but that place.

Mr. SMYER. Do they not keep them in grocery stores here?

Mr. SHUSTER. I don't think so; not like those. I don't know how they could. I don't see how anybody would ever buy them more than once. No, sir; I never saw such things as that.

Mr. SMYER. How was that butter?

Mr. SHUSTER. Butter?

Mr. SMYER. Yes; how was it?

Mr. SHUSTER. Why, that is not butter, sir.

Mr. SMYER. What was it?

Mr. SHUSTER. I think it was a little lard and some grease mixed up with a little salt in it; lard and grease of some kind. It is butterine. I have heard that they have a butterine factory over there.

Mr. SMYER. Would you call it butter at all?

Mr. SHUSTER. No, sir.

Mr. SMYER. Was it white in appearance?

Mr. SHUSTER. Well, not strictly white.

Mr. SMYER. What was it?

Mr. SHUSTER. It had a yellowish—you might call it a cream color.

Mr. SMYER. Was it soft, like lard, or hard, rather like butter?

Mr. SHUSTER. Well, kind of hard. Oh, no; it was not as soft as lard, nor as white as lard.

Mr. SMYER. Was it rancid?

Mr. SHUSTER. No, sir; it was not rancid.

Mr. SMYER. Did it taste like butter?

Mr. SHUSTER. Well, yes; something like butter. Of course, it didn't have the taste of butter.

Mr. SMYER. You have tasted butter?

Mr. SHUSTER. Yes.

Mr. SMYER. And you have tasted lard?

Mr. SHUSTER. Yes, sir.

Mr. SMYER. Did it taste like either butter or lard?

MR. SHUSTER. It tasted more like lard than it did like butter.

THE CHAIRMAN. Mr. Shuster, was a part of your treatment the taking of baths there at the hospital?

MR. SHUSTER. What is that?

THE CHAIRMAN. Was part of your treatment, I say, the taking of baths at the hospital?

MR. SHUSTER. Yes, sir; and they were very obnoxious to me.

THE CHAIRMAN. Whereabouts were those?

MR. SHUSTER. In B. B. Building. I was put in a room with six or seven naked men. I used to beg the attendant to let me take a bath last, and he would tell me, "You will take a bath when I tell you."

THE CHAIRMAN. Was it a needle bath?

MR. SHUSTER. No, sir.

THE CHAIRMAN. What was it? A bath tub you are talking about?

MR. SHUSTER. A bath tub.

THE CHAIRMAN. What was the matter with the bath, particularly, that you objected to?

MR. SHUSTER. I have a great objection to going in a bathroom with half a dozen naked men. I used to ask to be permitted to be the last one, and they would make me take a bath when they got ready. They bathed maybe thirty or thirty-five men there in two or three hours? I was in the tub once. I had just got in, and another attendant ordered me out. I said, "I just got in the tub." He said, "You get out of that tub or I will throw you out. Get your clothes; get out of there."

MR. SMYSER. Who was that?

MR. SHUSTER. That was the oldest Thorn that was discharged from there. There was two of those brothers. One of them was discharged from there while I was at the institution. He was a very large fellow. I forget what his first name was.

THE CHAIRMAN. The water that was used for the bath was clean, was it not?

MR. SHUSTER. I think so.

THE CHAIRMAN. The tub was in a good condition, was it not?

MR. SHUSTER. Yes, sir; all that ever I saw. I was in a tub one day and one of the crazy men in there jumped in the tub with me. I asked the attendant to take him out, and he laughed at me. He said, "He won't hurt you." But that was more the attendant's fault, I think. The fellow didn't realize what he was doing, I don't think.

THE CHAIRMAN. Did you lose any property? Did you not say you lost some property in the asylum? What was that?

MR. SHUSTER. Yes.

THE CHAIRMAN. What was that?

MR. SHUSTER. I lost a gold collar button and a very little knife, that they took away from me the evening I went there. I remember Martin—I think that was the attendant's name that took it. He told me he delivered it over to Mr. Burch, and I was never able to get a little knife. There was no value to it; I suppose it was a 50-cent knife—a nail knife.

THE CHAIRMAN. You mean that when you went to the asylum that was taken from you?

MR. SHUSTER. Yes, sir; the knife. Of course they don't allow anybody to have them, and that is perfectly right. They took the little knife away, and I was never able to get it back. Martin said he gave

it to Mr. Burch to turn over to the supervisor. I went to Mr. Burch, and he said he never did see the knife. He never did give a respectful answer to me, anyhow.

The CHAIRMAN. Did you ever see any patients struck there?

Mr. SHUSTER. I saw a patient by the name of Leonard Bradley, who is now dead. He was a very nice little fellow. Poor fellow, I think he had softening of the brain. I saw him pushed down the steps by an attendant one day, coming out of Sycamore ward. I spoke to the attendant about it, and he said, "I will push you down." Well, I guess that is right. I saw Mr. Ford, a gentleman there, in the bathroom one day, sitting on a chair waiting to take a bath. Poor fellow, he had hallucinations and thought people were prosecuting him and accusing him of all sorts of wrong things. An attendant told him to get up and get a bath. He didn't know what they said, and the attendant grabbed him by the arms and let him fall on the stone floor. I said: "Don't do that to that man." He said: "You mind your own business. Who is doing this?" There is one supervisor there that I feel like I must say something about, and that is a gentleman by the name of Mr. Maloney. He certainly treated me with the greatest respect on all occasions; and a lady nurse there that treated me very nicely, and her name is Mrs. Martin, and I never will forget them.

The CHAIRMAN. Was this Maloney, the inspector you speak of, the one you complained to?

Mr. SHUSTER. Complained?

The CHAIRMAN. Was he the one you complained to about the others?

Mr. SHUSTER. No, sir; his name was Burch.

The CHAIRMAN. That is, it was Burch you told about the ill-treatment you got from the attendants?

Mr. SHUSTER. Yes, sir; I told him how Thorn cursed me when he came to the door. He said: "He has a right to open the door," and that is all the satisfaction I got—that is what he is there for."

The CHAIRMAN. Did you ever speak to Maloney about it?

Mr. SHUSTER. No, sir; he was over in a different building from my part. I found Mr. Maloney as nice a gentleman as I ever met in my life.

TESTIMONY OF DR. J. RAMSAY NEVITT—Continued.

Dr. J. RAMSAY NEVITT, who had been previously sworn, resumed the stand, and testified as follows:

The CHAIRMAN. Doctor, have you the report you spoke of the other day with you?

Dr. NEVITT. Yes, sir; I have. I will be just as brief as possible. The letter in reference to the affair was forwarded to me by the health officer of the District of Columbia on March 14, 1906. The indorsement on the letter is:

Health Dept., D. C., No. 62614.

Mar. 14, 1906. Evans, Richard P., attorney for the Medical-Legal Society.

Calls attention to the case of Geo. Brown, late a patient in the Government Hospital for the Insane, giving a copy of the death certificate which fails to make mention of the alleged fact that the patient was terribly scalded, in the

manner described within, and thinks, for reasons stated, that an inquisition should be made by the coroner of the District.

L. S. 77970.

Mar. 14, 1906. Health officer.

Health department, Mar. 14, 1906.

Respectfully referred to the coroner, D. C., inviting attention to copy of letter of acknowledgment sent to the writer this day. Wm. C. Woodward, M. D., health officer.

This letter was directed to Doctor Woodward, who is the health officer:

[Richard P. Evans, attorney and counselor at law, 1403 New York avenue.]

WASHINGTON, D. C., March 14, 1906.

Dr. Wm. C. Woodward,
Health Officer, District of Columbia.

DEAR SIR: I have to call your attention, officially, to case No. 165895 of George Brown (an ex-soldier), late a patient in the Government Hospital for the Insane (St. Elizabeth), in which the death certificate, signed by one of the hospital physicians, is to following effect:

"George Brown. Died February 26, 1906. Age, 58. Cause of death: Primary, aortic stenosis and regurgitation; duration, six months. Immediate cause of death, syncope and cardiac paralysis; duration, five minutes"—

Mr. HAY. Cardiac paralysis. That means heart disease, does it not?

Doctor NEVITT. Yes. (Reading:)

"in institution since July 19, 1905."

Several days prior to this man's death I reviewed information that he was a patient on "R 4," and partially paralyzed, and that on February 14, 1906, he was placed by an attendant, nurse, or other employee of the hospital upon a water-closet seat, or douche stool, into the bowl of which hot water or steam was permitted to flow; and being left alone by said employee, and unable to move from the closet stool in his absence, said patient had to remain there seated until his exposed parts were horribly scalded; and that a surgical operation for removal of said scalded parts was in contemplation.

The said death certificate filed makes no mention of such alleged accident, nor of any operation in consequence.

Under these alleged circumstances, it appears to me that an inquisition should be made by the coroner of the District into the facts of said alleged scalding and the cause of death of said George Brown, and, further, as to whether an autopsy was held by the hospital authorities, and, if so, when, for what purpose, and by what authority it was held.

Very respectfully,

RICHARD P. EVANS,
Attorney for the Medico-Legal Society.

This is the answer, as I take it, sent by Doctor Woodward to Mr. Evans:

WASHINGTON, March 14, 1906.

Mr. RICHARD P. EVANS,
Attorney for the Medico-Legal Society,

1403 New York avenue NW., Washington, D. C.

SIR: I beg to acknowledge the receipt of your letter of the 14th instant, suggesting that an inquisition should be made by the coroner of the District into the facts of the alleged scalding and the cause of the death of one George Brown, late inmate of the Government Hospital for the Insane. I have forwarded your letter to Dr. J. Ramsay Nevitt, coroner, for such action as he may deem proper. The coroner is in no way subject to the directions of the health officer, but is an independent officer of the District government, responsible directly to the commissioners of the District of Columbia.

Respectfully,

WM. C. WOODWARD, M. D.,
Health Officer.

That reply is dated the 14th.

I will say that for several days I had a great deal to do. I was somewhat under the weather, and contemplated going away, which I did later on. But before I went away—in fact, the day I went away, March 20, 1906—I visited Dr. J. Ford Thompson and asked him for a statement in regard to the matter, in writing. He gave me the following statement:

[J. Ford Thompson, M. D., 804 Seventeenth street NW.]

WASHINGTON, D. C., *March 20, 1906.*

Coroner J. R. NEVITT.

DEAR SIR: A few days after the accident which happened to George Brown at St. Elizabeth Hospital February 14, 1906, I examined him, with the doctor in charge, and as a result of examination I was firmly of opinion that his injuries were not sufficient to cause death, and I therefore gave a favorable prognosis of his case. I do not believe his death was caused by the scald he sustained.

Very respectfully,

J. FORD THOMPSON, M. D.

I also forwarded, or gave in person, the letter of Mr. Evans, of the Medico-Legal Society—

The CHAIRMAN. Mr. who?

Doctor NEVITT. Mr. Evans.

The CHAIRMAN. Oh, I did not understand the name.

Doctor NEVITT. To Doctor White; and I received this reply from him.

Mr. HAY. You mean the superintendent of the institution?

Doctor NEVITT. Yes, sir; Doctor White. I received this reply from him:

[William A. White, M. D., superintendent. In re George Brown.]

GOVERNMENT HOSPITAL FOR THE INSANE,
Washington, D. C. March 16, 1906.

Dr. J. RAMSAY NEVITT,

Coroner, No. 225 John Marshall place, Washington, D. C.

MY DEAR DOCTOR: I am in receipt of a letter from Mr. R. Evans to the health officer, together with a copy of his reply; both referred to you by the health officer, and to me for information.

In reply, I have to inform you that the patient in question, George Brown, was scalded on the 14th of February last. The scalding was purely accidental, and could not by any possibility have been foreseen. It was due to the backing up of the steam and hot water from the heater into the cold-water supply pipe of the heater. This is a thing which occasionally happens. I have known it to occur a number of times in my own experience. It was due to defective action of the thermostat valve in the cold-water supply pipe, the result perhaps of its being clogged with sand or to some similar cause. I have never known, however, anybody to be injured by this accident before. This patient was sitting on the hopper, and being very feeble it was probably several seconds before he could escape from the escaping steam. He was burned about the buttocks and perineum and the scrotum.

The visiting surgeon on duty at that time, Dr. J. Ford Thompson, was called into consultation and gave it as his professional opinion that the case was one that did not require an operation and that the reparative process of nature would take care of the injured.

The patient died on the 26th of February, without in the interval having shown any symptom of exhaustion from the effects of his injury. His death was very sudden and unexpected, and in the opinion of the attending physician it was due to the causes set forth in the death certificate.

Attempts to locate the friends or relatives of this patient failed to secure any response, and an autopsy was held. The autopsy did not disclose any direct connection between the burns and the patient's death. The principal finding

of the autopsy related to the condition of the heart, which was flabby, and presented marked evidences of chronic endocarditis, with thickening of the valves. Under these circumstances there did not seem to be any occasion for calling in the coroner.

Very respectfully,

WM. A. WHITE, *Superintendent.*

That is dated March 16, 1906.

This document is quite long, and I do not know whether you wish to hear it or not.

The CHAIRMAN. What is that, your report?

Doctor NEVITT. Yes, sir.

Investigation by the coroner into the circumstances——

The CHAIRMAN. Can we not have a copy of that report filed, so that we need not have it read?

Doctor NEVITT. Yes, sir. I think it will take me about ten minutes to read it.

Mr. HAY. Let us have it read.

Doctor NEVITT (reading):

INVESTIGATION BY THE CORONER INTO THE CIRCUMSTANCES ATTENDING THE ACCIDENTAL SCALDING OF GEORGE BROWN ON FEBRUARY 14, 1906, IN THE R BUILDING, GOVERNMENT HOSPITAL FOR THE INSANE.

I will state that I went over to St. Elizabeth's, I think it was on Saturday. Doctor White, was it not Saturday I was there?

Doctor WHITE. I think so, doctor.

Doctor NEVITT (reading):

CORONER. Was this patient under your care?

Doctor LOGIE. Yes, sir.

CORONER. For how long, approximately?

Doctor LOGIE. From July, 1905, to February, 1906.

CORONER. Who is the engineer?

Doctor LOGIE. Mr. Folsom.

CORONER. Did this heating apparatus get out of order and indirectly cause some injury to this patient?

Doctor LOGIE. Yes, sir.

CORONER (to Mr. Folsom). Tell me, please, how it got out of order.

Mr. FOLSOM. We have never had this same trouble before, which led us to believe that there was no danger in this particular way. This heater is nothing but a tank with a thin coil of pipe inside; the steam passing through this coil heats the water; the steam supply to this tank is regulated by a thermostat, which is regulated by the water itself; when the water becomes cold it throws the steam on automatically.

CORONER. Did a similar accident ever occur to this apparatus?

Mr. FOLSOM. No; an accident never occurred in this particular way, to my knowledge.

CORONER. Now, Mr. Folsom, did I not understand you to say that some accident of minor importance had occurred through this apparatus?

Mr. FOLSOM. No. Except that complaints were occasionally made about failure to turn the steam on, thus allowing the water to get cold.

CORONER. How long previous to the accident had it been examined?

Mr. FOLSOM. I can not say exactly. I believe about three or four months before.

CORONER. How old is this plant?

Mr. FOLSOM. These buildings were occupied in the fall of 1904. The plant is about eighteen months old.

CORONER. Comparatively, then, a new apparatus. What is generally the life of such an apparatus?

Mr. FOLSOM. Anywhere about fifteen years.

CORONER. You said it was examined about three months before this accident?

Mr. FOLSOM. As near as I can remember, about that length of time.

CORONER. How long have you been chief engineer here?

Mr. FOLSOM. Since the 27th of January, 1904.

CORONER. Have you had charge of plants as large as this, previously?

Mr. FOLSOM. Oh, yes. I was in charge of the Potomac power house in Georgetown, and I was in charge of the Shoreham Hotel.

Doctor STACK (to Mr. Folsom). Explain to the coroner the mechanism and operation of this water heater.

Mr. FOLSOM. There are very fine portholes in this thermostat to allow the water to circulate around the brass head which by expansion and contraction of said head opens and closes the small valve allowing the water pressure to go into the diaphragm valve on the steam line; said diaphragm valve regulates the flow of steam through the heater. These portholes had stopped up with iron rust and scale, and which caused the steam valve to fail to close. This allowed the steam to be generated in the heater and steam and hot water backed out of the heater into the cold water supply line. This is what caused the trouble.

CORONER. What particular apparatus did this occur in? Was it simply a closet attachment?

Mr. FOLSOM. Yes, sir. The J. B. Clow & Sons Automatic Water Heater.

CORONER. It is strictly a first-class machine?

Mr. FOLSOM. It is a standard first-class water-heating apparatus.

CORONER. How many sections does this supply?

Mr. FOLSOM. The hot water is not supposed to go up into the closet at all. This heater supplies the hot water for 12 water sections.

CORONER. Who first discovered that the apparatus was out of order?

Mr. FOLSOM. The first report I got was next morning after 8 o'clock.

Doctor LOGIE. J. I. Bailey, the night nurse, first discovered it.

CORONER. Mr. Folsom, explain how you found it.

Mr. FOLSOM. The hot water had backed into the cold water supply on account of undue pressure in the heater caused by the water becoming too hot. It was backed up into the flush tank; of course, being a closed tank, there is no vapor to indicate the water being too hot. Of course, that water being under pressure, when it was exposed to the atmosphere went to steam.

CORONER (to Doctor Logie). Did anybody take him up from the seat?

Doctor LOGIE. Yes, sir. The night nurse.

CORONER. About what time did it occur?

Doctor LOGIE. It occurred a little after 8 o'clock at night.

CORONER. Did you have an attendant of any kind on duty?

Doctor LOGIE. Yes; the regular force of night nurses.

CORONER. How many attendants were there upstairs?

Doctor LOGIE. One. We have two on this ward.

CORONER. In his statement to you as medical officer in charge of this service, what did he report?

Doctor LOGIE. He did not make any report of it to me. I was absent from the institution at the time and the report was carried to the gentleman who was acting for me—Doctor Fitch.

CORONER. What was this report?

Doctor LOGIE. It was a verbal report which I can give you.

(This report will appear in Doctor Logie's statement to follow.)

CORONER. Did his cries or anything of that sort bring the attention of the attendant to him?

Doctor LOGIE. Yes, sir. In this connection I would like to make a statement. This man was a feeble man, suffering from muscular weakness involving the legs, spastic paraplegia, and it was necessary to take him to the closet, and he was unable to rise of his own volition.

CORONER. How long after the alarm was given to your attendant was he taken from the closet?

Doctor LOGIE. Instantaneously.

CORONER. The attendant was right near by and went to him at once?

Doctor LOGIE. Yes, sir.

CORONER. Doctor Logie, when he was through using the commode would he have sense enough to give warning?

Doctor LOGIE. He had sense enough to give warning, but was not able to get up with sufficient rapidity to escape the steam.

CORONER. When were these heaters examined?

Mr. FOLSOM. I had all these heaters gone over and the thermostats examined.

CORONER. When?

Mr. FOLSOM. When this trouble occurred.

CORONER. I wish to know if you have made any repairs previously to this heater?

Mr. FOLSOM. No, sir.

CORONER. Who is supposed to notify you?

Mr. FOLSOM. The medical officer in charge of the service.

Then there is something left out.

(Interrogation of J. I. Bailey, night nurse.)

CORONER. What is the name of the patient?

Mr. BAILEY. George Brown.

CORONER. Tell us all you know about the case.

Mr. BAILEY. I went on duty at 8 o'clock, and this accident happened at 8 minutes after 8. The patient was feeble, but still he could walk. I did not assist him. There was another patient having a convulsion, and I went to his assistance. The patient went by himself, and I fixed his bed for him, and went in as soon as I came up the hall. While I was standing about three steps away from him the steam burst out of the heater while he was sitting there.

CORONER. Did he attempt to get up?

Mr. BAILEY. No. It was so sudden that he did not know what was happening. I went to assist him up right away.

CORONER. Explain the relative positions of his bed and the closet.

Mr. BAILEY. His bed is right next to the door leading into the closet.

CORONER. You were about three steps away from him?

Mr. BAILEY. Yes, sir.

CORONER. How long after it burst out did you get him off?

Mr. BAILEY. It was not over three seconds—just as soon as I possibly could.

CORONER (to Doctors Logie and Stack). Can you gentlemen suggest any further questions to ask?

(Doctors Logie and Stack answered in the negative.)

CORONER. Doctor Logie, you attended this case after the accident happened?

Doctor LOGIE. Yes, sir.

CORONER. And you were acquainted with all the facts in the case?

Doctor LOGIE. Yes, sir.

CORONER. Give me a description of his illness.

Doctor LOGIE. On the 14th of February the patient visited the toilet at about 8 o'clock in the evening. While the patient was on the hopper hot steam escaped therefrom; this caused the patient to summon the attendant, who went at once to his aid and lifted him from the seat. The patient was burned about the buttocks and around the scrotum, and Doctor Fitch, who was acting for me in my absence from the hospital, was summoned to the patient and first prescribed for him. The patient did very well until the 16th of February, when he developed an elevation of temperature; this did not amount to much, the highest point being about 102. It began to subside within a few days, and on the 23d of February was about normal, and the general condition of the patient was quite satisfactory indeed.

At 4 o'clock in the afternoon our records show that his temperature stood at 99.2; that his pulse was 82, and respiration 18. He died suddenly about 6.30 o'clock on the 27th of February. The autopsy was performed by Doctor Blackburn of the hospital staff, whose findings showed that the lungs were somewhat congested, there being two hemorrhagic infarctions at the edge of the right lung. In the heart there was an opaque patch over the apex of the right ventricle and one over the anterior wall of the right ventricle. The left valves were thickened and calcareous, the aorta showed commencing atheroma, and the mitral valve was thickened at its edge. There was some ecchymotic condition of the mucous membranes of the stomach and a slight degree of the same condition at the upper end of the stomach. There was a slight cystitis.

CORONER (to Doctor Logie). Do you consider that his death was due to the escaping hot water that was turned on the body of the patient?

Doctor LOGIE. No, sir.

That ends my report.

This is the original report that I sent for at the health office, that was turned in from the Government Asylum for the Insane.

The CHAIRMAN. Have you got, in what you have been reading there, what your opinion was after having taken this testimony?

Doctor NEVITT. I will give that verbally.

This is the report I referred to a moment ago:

Dist. No. 26.

Class No. 111/79.

Certificate of death. District of Columbia.

No. of burial permit, 166135.

No. of record, 165895.

Full instructions for the guidance of those using this blank and space for remarks may be found on the other side.

1. Date of this death: February 26, 1906.

2. Full name of deceased: George Brown.

3. Sex. 4. Age. 5. Color. 6. Conjugal condition.

Male.

Years: 58.

White.

Single.

Months: x.

Days: x.

Under sex, color, and conjugal condition strike out the words not applicable.

Under color the term "colored" includes all of African descent, whether of pure or mixed blood.

7. Occupation: Soldier.

8. Birthplace of deceased: United States. (If born in the United States give State, Territory, or district; otherwise give country.)

9. Birthplace of father: Unknown.

10. Birthplace of mother: Unknown.

11. Duration of residence in this District: Unknown.

12. Place of death: Government Hospital for the Insane.

13. Cause of death: Primary: Aortic stenosis with regurgitation. Duration, six months. Immediate: Syncope and cardiac paralysis. Five minutes.

14. If death occurred in an institution, give: Name of institution: Government Hospital for the Insane. Length of time deceased was an inmate: Since July 19, 1905.

15. If deceased did not die at his or her residence, give: Place of residence: U. S. Soldiers' Home, D. C. I hereby certify that I attended the deceased professionally during his last illness.

B. R. LOGIE, M. D.,

Asst. Physician.

Address: Government Hospital for the Insane.

There is nothing on this certificate that shows there is anything wrong, or that should be called to the attention of the coroner.

The CHAIRMAN. What is the result of your investigation, in your opinion, in connection with this certificate, Doctor?

Doctor NEVITT. I went over this case as thoroughly as I ever attended to any other. Of course I am considerably embarrassed by not having seen the condition of the wound—that is, the injury to the scrotum and the soft parts—and I could only speak theoretically. I am inclined to think that for one reason—that is, the character of the men, whom I have known so long—for instance, Dr. J. Ford Thompson and the staff at St. Elizabeth's—I could hardly doubt their word. Therefore I could readily accept the certificate here—that he died of valvular disease of the heart.

Mr. HAY. What is your own opinion, upon the evidence?

Doctor NEVITT. I say I could not form an opinion, because I did not see the wound. Then, another thing: This man is supposed to have been a feeble man, and these cases generally die from shock as much as anything else. But he had gone past that period when they generally die from shock, which is one evidence in favor of Doctor Thompson's statement. But I will say this—I will volunteer this information: It seems to me it would have been better, if it necessitated calling in the visiting surgeon to see this case and the man subsequently died, that the coroner should have been notified of his death.

The CHAIRMAN. How long was it between the accident and the time the death occurred?

Mr. HAY. The accident happened on the 14th and he died on the 26th.

The CHAIRMAN. Twelve days elapsed.

Doctor NEVITT. From the 14th to the 26th. I believe that is right.

Mr. HAY. Although in the statement you make there, it is stated by Doctor Logie that he died on the 27th.

Doctor NEVITT. I recall that—the 27th.

Mr. HAY. If this patient had valvular disease of the heart of an organic character—I suppose that disease of the heart is an organic disease, is it not?

Doctor NEVITT. Yes, sir.

Mr. HAY. That would have been known, would it not, before he died?

Doctor NEVITT. Yes, sir.

Mr. HAY. And there would not have been any cause, would there, to have held any autopsy?

Doctor NEVITT. No, sir.

Mr. HAY. Why do you suppose they held this autopsy?

Doctor NEVITT. I think the custom is, when we can get permission, that they hold them on all subjects and keep a record.

Mr. HAY. At the hospital?

Doctor NEVITT. Yes.

Mr. HAY. Who has authority to hold the autopsy? Is it only held on the people who have no friends?

Doctor NEVITT. I don't know. Doctor White could tell you that better. I do not know the condition which exists there.

Mr. HAY. Have you ever investigated any of the suicides out there, Doctor?

Doctor NEVITT. Yes, sir.

Mr. HAY. Have you ever said to Doctor White, or to any of the staff, or advised with them as to how these suicides could be prevented?

Doctor NEVITT. No, sir. I spoke to Doctor White when he first took charge of the institution, incidentally. I met him in court. I do not know what the time was, but he had not been in charge of the institution very long. I suggested to him, as there had been several suicides, a majority of which were due to the large mesh of the grating of the windows, that a smaller mesh would be well; that it might prevent them using the large mesh, and running a cloth through, or a towel or something of that sort. That is the suggestion I have made.

Mr. HAY. Do you know whether that suggestion was carried out or not?

Doctor NEVITT. It was, I think.

Mr. HAY. You think it was. Did you investigate the case of suicide of Almira G. Bowers?

Doctor NEVITT. When was that?

Mr. HAY. January, 1905.

Doctor NEVITT. Yes, sir.

Mr. HAY. What was the result of your investigation?

Doctor NEVITT. The result of my investigation was that she died from suicide. I do not remember what the cause was. I think she

hung herself, though. I have the record, but I can not recall it. Her husband was there at the time when I investigated the case. He was present when I called on the different officers who had charge. I was satisfied that everything had been done to prevent this suicide, but I told him that if there was any doubt in his mind and it would be of any benefit to him that I would have an inquest by a coroner's jury. He said, "No; I am perfectly satisfied." Therefore I gave the certificate of death.

MR. HAY. Well, Doctor, from this George Brown case, from the result of that case and other cases, suicides, and so on, out at the hospital, what is your opinion as to whether or not the hospital has sufficient attendants?

DOCTOR NEVITT. Well, I should say that the hospital had not sufficient attendants.

MR. HAY. You think they ought to have more?

DOCTOR NEVITT. Without any question they are handicapped in that way.

MR. HAY. That is what I wanted to get at.

MR. SMYSER. Doctor, I want to ask you a question or two. The question I am going to ask you pertains to the living. As coronor and as a physician, from the familiarity you have had with that institution, what is your judgment as to the competency and efficiency of the staff there—Doctor White and his medical staff?

DOCTOR NEVITT. I do not think there is any better in any hospital in this town.

MR. SMYSER. And more particularly as to the doctors whose names occur in the report you have read—Doctor Logie, if I have the name correctly—

DOCTOR NEVITT. That is right.

MR. SMYSER. And Doctor Fitch?

DOCTOR NEVITT. Doctor Fitch. I am very well acquainted with him.

MR. SMYSER. And Doctor Stack?

DOCTOR NEVITT. I am very well acquainted with him. They are most excellent men. That is, I have heard their testimony on the stand and had occasion to observe them when their ability would show forth, and I would have no hesitancy in saying that they are most excellent men.

MR. SMYSER. Do you think some of the troubles that originated out there, complaints that result in investigations and so on, are due to the lack of sufficient force, attendants? Do you think that to increase the force would improve the situation some?

DOCTOR NEVITT. I think it would, most decidedly. It seemed to me they did not have enough attendants.

MR. SMYSER. Have you ever suggested to anybody that defect in the management of this institution?

DOCTOR NEVITT. Well, no, sir; I have not. My opinion has never been asked in that respect.

MR. SMYSER. Did you ever volunteer it?

DOCTOR NEVITT. Well, I think the institution is carried on remarkably well. It could be better if they had more assistants there.

MR. SMYSER. When you speak of assistants, do you mean the medical staff or what we call the attendants?

DOCTOR NEVITT. I mean both.

Mr. SMYSER. Would you include nurses in that? I take it you would.

Doctor NEVITT. Yes, sir; I think it suffers a great deal from that lack.

Mr. SMYSER. You said in this particular case, speaking of Brown, that you believed it would have been better to have had an examination there. Do you make that statement in view of the investigation that has arisen, that it would have been better to have an investigation to avoid criticism, or in what sense do you make that?

Doctor NEVITT. Well, I believe I said, referring to Dr. Ford Thompson in particular—his affidavit here, and so forth—that I am convinced that the man died from valvular disease of the heart, as often does occur. But the question that seemed not to be as clear as I would have liked it was that if Dr. Ford Thompson was called over there as visiting physician to see this wound, which is called in this report an accident, that the accident did not appear on the report of death, and I was not consulted at the death.

Mr. HAY. And you could not know anything about it?

Doctor NEVITT. No.

Mr. SMYSER. Taking the facts now, as you know them, and as you have got them, I want to put a question to you hypothetically. What, in your judgment, was the action and treatment of the hospital there in respect to this man?

Doctor NEVITT. As far as I could find out, it was entirely proper.

Mr. SMYSER. I am asked to submit a few questions that Mr. Evans has handed me. The witness has answered the first one. Did any witnesses testify before you over at the hospital other than the names you have given?

Doctor NEVITT. No, sir.

Mr. SMYSER. And their statements were taken down in stenography?

Doctor NEVITT. Yes, sir.

Mr. SMYSER. And transcribed, were they?

Doctor NEVITT. Yes, sir.

Mr. SMYSER. By whom?

Doctor NEVITT. By the stenographer there.

Mr. SMYSER. The same one?

Doctor NEVITT. Yes, sir. I will say also, going back, that an old valvular disease of the heart, to a great extent, may bring on or exaggerate the condition of the burn, which at first might seem insignificant; but the repair could not take place on account of the condition of the valves of the heart—even a minor injury. Dr. Ford Thompson stated that he thought everything was getting along all right, and was surprised to find that the man died after a few days. That was due to the condition of the heart. The valves were such that it did not permit of repair. They were old, worn-out valves. Their competency was interfered with.

Mr. SMYSER. If gangrene was present there, would that indicate that mortification had set in?

Doctor NEVITT. Yes, sir; and would also indicate that the heart valves were very much affected.

Mr. SMYSER. Ordinarily you would not have anticipated that, if you had had fair heart action?

Doctor NEVITT. Yes; fair heart action.

Mr. SMYSER. Ordinarily, burns of that class, do they become fatal or not?

Doctor NEVITT. They heal all right, just as Dr. Ford Thompson gave in his testimony. I suppose that in the beginning—and it is only a supposition—the wound itself was incidental, and they did not anticipate any such outcome as this—that the man would die—and therefore did not attribute his death to the scald.

Mr. SMYSER. Ought they to have anticipated that result, though, as physicians?

Doctor NEVITT. It depends upon the wound itself and the condition of those valves; but I am unable to say, one way or the other.

Mr. SMYSER. I understood you to say that the condition of the heart could have been discovered during the lifetime of the patient.

Doctor NEVITT. I think the probabilities are that some of the members of the staff are here, and maybe they have examined him, and they can tell if it was observed in the hospital. I think it was, though.

Mr. SMYSER. Do you know whether, as a matter of fact, they hold autopsies out there, not simply for the purpose of discovering the cause of death, but in the interest not only of the institution, but of science generally?

Doctor NEVITT. Well, I think they are for scientific purposes alone.

Mr. SMYSER. Is that proper?

Doctor NEVITT. I think it is, according to the law of the District.

Mr. SMYSER. From a scientific standpoint?

Doctor NEVITT. I think it is, as far as the laws of the District are concerned. I do not know anything to the contrary.

Mr. SMYSER. I mean to take in the whole medical fraternity, because if we can discover something down here I want the benefit of it out at my farm—which I haven't got. [Laughter.] I want to know. I am serious about this. Is it proper over there?

Doctor NEVITT. I can not answer that. I do not know what jurisdiction they have.

Mr. SMYSER. Assuming that they have jurisdiction to hold autopsies, as they do perhaps; assuming that they have that.

Doctor NEVITT. Yes.

Mr. SMYSER. In the interest of the institution and of science, and for the benefit of the human race, is it advisable to go on and have those autopsies for educational purposes?

Doctor NEVITT. I certainly do consider it so.

Mr. HAY. What jurisdiction has anyone in the District of Columbia to hold autopsies?

Doctor NEVITT. Well, there is a law, a recent law—I have not read it, though—that the coroner can order an autopsy on cases in which they die from causes that you are not able to determine without one; or, if they die from accident, he can order an autopsy, or in assault cases, and so forth.

Mr. HAY. That is a general law, is it?

Doctor NEVITT. No, sir; I don't say it is a general law. I don't know what law covers it. As far as I know, if the attending physician has written permission of any member of the family of the deceased, he can go to work and perform an autopsy. He can refuse to give a death certificate if he does not know.

Mr. HAY. And if the authorities at the asylum perform autopsies, they have that jurisdiction, or can do that, from some law which pertains to the asylum, I suppose?

Doctor NEVITT. I think so.

Mr. SMYSER. One further question, I am requested to ask you. Have you seen strait-jackets in use out there?

Doctor NEVITT. Yes, sir.

Mr. SMYSER. How frequently?

Doctor NEVITT. I have seen them on two occasions.

Mr. SMYSER. Did you make any examination of the patient, so that you—

Doctor NEVITT. I did.

Mr. SMYSER. So that you could give us an opinion as to whether or not in those particular cases the use of the strait-jacket was justified?

Doctor NEVITT. Perfectly so, in these cases I remember seeing. I have only seen two in my visits to St. Elizabeth's, and I have had opportunity to go through the wards whenever I wished.

Mr. BARCHFELD. Doctor, with reference to your comment on the insufficient amount of help, what, in your judgment, is the necessary number of attendants to take care of a given number of patients? Do you know the number of attendants in each ward—say a ward of 30 patients?

Doctor NEVITT. Well, I do not feel competent to pass on that question; but I could recognize this fact, that there were very few, very few; and considering the condition of the patients and the number of them, I thought the staff was a very small one for the duties they had to perform.

Mr. BARCHFELD. The staff? What do you mean—the medical staff?

Doctor NEVITT. The medical staff, and the corps of nurses and attendants in various capacities—orderlies, if you may call them such—and so forth.

Mr. BARCHFELD. Could you give us some idea as to what you think would constitute the proper working staff with, say, 30 patients?

Doctor NEVITT. Well, we will say 30 patients. The character of the malady would govern me in giving an opinion. For instance, if they were violent it would require much more on that ward than it would on a ward of helpless epileptics, or idiots, you might say—I will not say epileptics, because they have rational moments, when they can walk around. I will withdraw that, and say those suffering from minor brain diseases.

Mr. SMYSER. Do you think that is an appropriate place for ordinary epileptics?

Doctor NEVITT. At St. Elizabeth?

Mr. SMYSER. Yes.

Doctor NEVITT. I am not an expert on that subject, but I do not see any particular harm from having them there.

Mr. SMYSER. Do you see any particular good?

Doctor NEVITT. No; I do not.

Mr. SMYSER. Would it not be better to have a separate institution for epileptics?

Doctor NEVITT. Undoubtedly so, for each class, if I might say so, in my opinion.

The CHAIRMAN. The epileptics out there are in a separate building, are they not?

Doctor NEVITT. I could not tell you.

The CHAIRMAN. I think at the last hearing you said you would testify in regard to some other case than the Brown case. Is there any—

Mr. SMYSER. Abuse?

Doctor NEVITT. No; I don't think I said so.

The CHAIRMAN. I thought you did.

Doctor NEVITT. No; I do not think so.

The CHAIRMAN. Is there any other fact you can give us that will help us in this investigation—any other case?

Doctor NEVITT. I can not think of any other case. As I said in the first part of my statement, and as I will say also at this time, I thought they had a very fine staff there, such as it was. It is insufficient, perhaps, as I take it. I say so to-day.

Mr. HAY. Doctor, Congress appropriates for this asylum, I believe, does it not?

Doctor NEVITT. Yes, sir.

Mr. HAY. Whose duty is it to call the attention of Congress to the fact that they do not have as large a force there, both on the staff and in general attendants, as they should have?

Doctor NEVITT. I could not answer that question.

Mr. HAY. You would not?

Doctor NEVITT. No, sir.

Mr. SMYSER. If you know that fact, holding the position you do, do you not think it is getting pretty close home to you?

Doctor NEVITT. That I should suggest to Congress?

Mr. SMYSER. Yes, sir.

Doctor NEVITT. Well, I will not sidestep the question.

Mr. SMYSER. That is good.

Doctor NEVITT. If you think so I will say so. [Laughter.]

Mr. SMYSER. I do most emphatically think that you are in a position to know, and it is your duty, in behalf not only of the people of Washington, but all over the United States, whose insane come here, to say to Congress that they are niggardly and stingy in providing the necessary attendants out there to take care of these poor, unfortunate people who land there. If you want my opinion as to your duty, you have got it.

Doctor NEVITT. All right; I am much obliged to you.

Mr. SMYSER. I do not mean it offensively, Doctor.

Doctor NEVITT. There is such a thing as being politely turned down if you interfere in affairs that do not belong to you. That obtains in this District to a certain extent.

Mr. SMYSER. I have heard that. [Laughter.] I simply mean this, Doctor, that it is, in my judgment, the duty of all good citizens, knowing the situation there, to call it to the attention of Congress.

Mr. EVANS. Does that apply to me?

Mr. SMYSER. Everybody. I do not exclude you, sir.

Doctor NEVITT. There is only one coroner in the District of Columbia. I have to cover the whole area, and I have no assistance at all. I have plenty to do with the deaths that come to me, much less to investigate other institutions, find out what is lacking, and report it to Congress.

Mr. BARCHFELD. As coroner of this District, do you encourage autopsies?

Doctor NEVITT. Do I encourage them?

Mr. BARCHFELD. In all cases of violence and all cases of accident—

Doctor NEVITT. In all cases of accident I do.

Mr. BARCHFELD. And cases of sudden death?

Doctor NEVITT. Not in all cases. We would like to perform autopsies in more cases, but we have to be economical with this fund that we have, and therefore we do not have as many autopsies as we should have, on account of the appropriation. We have to make it last.

Mr. BARCHFELD. You certainly feel like encouraging autopsies?

Doctor NEVITT. I do, because I feel they should be encouraged, in this particular way—that we should know by an autopsy the actual cause, notwithstanding the case history, as we call it, might be clear, and we would be justified in giving a certificate, as I often do, on the history of the case. It would be much better if we could have an autopsy, but that costs the District something, and with the appropriation we have it is utterly impossible. It generally runs out about the 1st of March.

Mr. BARCHFELD. What provision does Congress make for holding autopsies? In other words, what appropriation does that particular fund carry with it?

Doctor NEVITT. How much?

Mr. BARCHFELD. Yes.

Doctor NEVITT. About \$500.

Mr. BARCHFELD. What do you pay your physician for holding an autopsy?

Doctor NEVITT. He is paid \$10 for every autopsy he performs—that is, not a violent case. For instance, in an assault case, if a man dies from an assault, or in a criminal case, that is paid by the United States Government, \$25. He is only paid by his work.

Mr. BARCHFELD. Yes.

Doctor NEVITT. During the absence of the coroner he receives a salary of \$5 a day for performing the work of the coroner. Then he gets a deputy. The law allows a deputy to help him.

Mr. BARCHFELD. You say the entire appropriation made by Congress for the purpose of holding autopsies in the District of Columbia, a District that has a population of 300,000 souls, is \$500?

Doctor NEVITT. Yes, sir.

Mr. BARCHFELD. You say, further, that his fee for holding an ordinary autopsy is \$10?

Doctor NEVITT. Yes, sir.

Mr. BARCHFELD. And in a criminal case \$25?

Doctor NEVITT. Yes; paid not by the District, but by the United States Government entirely.

Mr. BARCHFELD. When your appropriation of \$500 is exhausted you are helpless—you can not go any further?

Doctor NEVITT. Yes, sir; we can not go any further. That depends on the deficiency, what is known as the deficiency bill.

Mr. BARCHFELD. You hold, possibly, in the District of Columbia some 40, or no higher than 50, autopsies in a year?

Doctor NEVITT. We hold about on an average of 65—60 to 65 autopsies.

Mr. BARCHFELD. Sixty to sixty-five autopsies in a year?

Doctor NEVITT. About 60.

Mr. BARCHFELD. How many cases of violent death do you have in the course of the year, generally speaking?

Doctor NEVITT. I can not tell very accurately. I should say about 12. From 12 to 15.

Mr. BARCHFELD. Is that the number of homicides or murders that you have in the District?

Doctor NEVITT. Yes, sir.

Mr. BARCHFELD. Do you hold an autopsy in every one of those cases?

Doctor NEVITT. Murder cases?

Mr. BARCHFELD. Yes.

Doctor NEVITT. Yes, sir.

Mr. BARCHFELD. Does that fee come from the fund of \$500?

Doctor NEVITT. No, sir.

Mr. BARCHFELD. That comes from the court itself, does it?

Doctor NEVITT. Yes, sir.

Mr. BARCHFELD. The District court?

Doctor NEVITT. Yes, sir.

Mr. BARCHFELD. As a progressive, scientific man, do you not believe that it is right and proper to hold an autopsy in every instance?

Doctor NEVITT. I should think it ought to be done.

Mr. BARCHFELD. Medicine, you know, is a progressive science.

Doctor NEVITT. Yes, sir.

Mr. BARCHFELD. And it should be recognized as such, and everything that will help——

Doctor NEVITT. It would help materially to advance the science.

Mr. BARCHFELD. Do you know of any reason why they should not hold autopsies at an institution like this Government Asylum for the Insane?

Doctor NEVITT. No, sir.

Mr. BARCHFELD. Do you know of any reason why they should not hold an autopsy in every instance?

Doctor NEVITT. According to the law in the District of Columbia, if a man died from other than natural causes it is a coroner's case, and he has an autopsy performed.

Mr. BARCHFELD. But you have not got sufficient funds to perform them.

Doctor NEVITT. That is true, but we do the best we can.

Mr. BARCHFELD. But that is unsatisfactory work.

Doctor NEVITT. Decidedly so. Then the deputy coroner, or my assistant, who does the autopsy work, puts in his bill, and it goes in the general deficiency bill, or some such bill. I think that is the name of it.

Mr. BARCHFELD. The work done by the pathologist at this institution, as far as you know, is strictly up-to-date and absolutely practical?

Doctor NEVITT. There is no better in the United States, and I doubt whether there is in any other country.

Mr. BARCHFELD. You know that his work is being reported in all the journals relating to medicine all over the country?

Doctor NEVITT. Certainly; and also that he is the author of several very valuable pamphlets on his specialty, which I believe is the brain.

Mr. BARCHFELD. His discoveries, in other words.

Doctor NEVITT. Yes, sir; he has made several valuable ones, and I may say that without this latitude that he has he would not have been able to arrive at these conclusions and make these discoveries.

Mr. BARCHFELD. Then, your opinion, as coroner of the District of Columbia, is that, as far as you know, outside of the limited help that the Government allows them, it is one of the best managed institutions in the District?

Doctor NEVITT. What, St. Elizabeth's?

Mr. BARCHFELD. Yes.

Doctor NEVITT. I consider there is none managed any better in the District of Columbia and as far as I can see it is about the best managed one in the District.

Mr. SMYSER. Just one question. Do you know anything about the visits of the board of visitors over there?

Doctor NEVITT. I do not. I have heard there was such a body, but I have never seen them when I was there.

TESTIMONY OF MISS CORNELIA L. CORBETT.

Miss CORNELIA L. CORBETT, being duly sworn, was examined and testified as follows:

The CHAIRMAN. What is your full name?

Miss CORBETT. Cornelia L. Corbett.

The CHAIRMAN. Are you a patient at St. Elizabeth's now?

Miss CORBETT. I am.

The CHAIRMAN. How long have you been there?

Miss CORBETT. Nearly twenty-three months.

The CHAIRMAN. Is your treatment there in the hospital satisfactory? Are you properly cared for there? Have you any complaints whatever to make as to the care you receive in the hospital?

Miss CORBETT. No.

The CHAIRMAN. The nurses and attendants and doctors are polite to you and care for you properly, do they not?

Miss CORBETT. Yes, sir; they are polite.

The CHAIRMAN. You have not any complaints to make, have you, as to the treatment you receive there?

Miss CORBETT. No. Ever since I have been at the hospital I have attended to everything myself, so that I have not had to call on the nurses or the doctors in that way.

The CHAIRMAN. In other words, your health has been sufficiently good so that you could care for yourself entirely?

Miss CORBETT. Yes, sir; altogether. I have taken charge of everything myself; and whenever I have gone into town I have gone alone, so that I never have had to call on them for anything.

The CHAIRMAN. Miss Corbett, how about the food that is given to you in the hospital? Is it good?

Miss CORBETT. As a rule the food is good, but it is the way it is prepared that is not satisfactory.

The CHAIRMAN. You mean that it is not well cooked?

Miss CORBETT. No, sir.

The CHAIRMAN. Do you mean that the meats are not sufficiently done, or that the vegetables are not done?

Miss CORBETT. Usually the meat is too much—too well cooked at least.

The CHAIRMAN. Is the variety of the food satisfactory? I mean is there a sufficient variety, in your opinion, in the hospital?

Miss CORBETT. At times they have very good meals, but we can not always depend on them. Some days they are much better than others.

The CHAIRMAN. That sometimes happens, does it not, in our own houses?

Miss CORBETT. Yes, sir.

The CHAIRMAN. But there is not any complaint as to the character of food, is there? I mean the butter is good, for instance, as far as you know?

Miss CORBETT. Well, of course they have not the real butter. It is oleomargarine. The food is not tainted. It is all good food, but the cooking is not good—the way it is prepared.

The CHAIRMAN. Miss Corbett, you say you went to the hospital first twenty-three months ago?

Miss CORBETT. Yes, sir; we were taken out there Saturday afternoon, June 11, 1904.

The CHAIRMAN. Do you know whether any proceedings were had before you were taken out there? Was there a regular court commitment, do you know, or anything of that kind, as far as you know?

Miss CORBETT. The day we were taken there they came in without any warning whatever. We had not the least idea that any such thing was premeditated. We were taken right out of the house. They had a patrol wagon in front of the house. They had a large Irish policeman and a private detective, a woman—I don't know who she was—a lady physician, and a large, black policeman; and they put us in a patrol wagon, and there were two men on the front seat of this wagon. We were taken right over to St. Elizabeth's without any warning whatever. They came right in our house.

The CHAIRMAN. Do you know upon whose application this was done?

Miss CORBETT. I did not know at the time.

The CHAIRMAN. Do you know now?

Miss CORBETT. I have heard since that Doctor Hamlin, of the Church of the Covenant, was the one who instigated the proceedings.

The CHAIRMAN. Doctor Hamlin is a minister, a clergyman?

Miss CORBETT. Yes, sir.

The CHAIRMAN. Were any of these people that went out with you at the time you were taken to the hospital attendants in the hospital?

Miss CORBETT. Not that I know of.

The CHAIRMAN. You did not see them after you got there?

Miss CORBETT. No, sir.

Mr. HAY. Since you have been there, have you been restrained in any way? You could go into town whenever you felt like it?

Miss CORBETT. We have been on the convalescent ward with the exception of three nights and four days. We were kept on what they call the "receiving" ward for three nights and four days. The afternoon of the fourth day we were taken up to what is called

"cedar" ward; that is the convalescent ward. After these new buildings were finished we were moved over into what they call the "L" building.

Mr. HAY. You say you go in town whenever you have occasion to go, by yourself?

Miss CORBETT. Yes, sir. We did not go, in fact, for about a year after we went over. We never asked to go, because we wished to be taken away before going in.

The CHAIRMAN. Does your mother come in town with you, Miss Corbett, too?

Miss CORBETT. Yes, sir.

Mr. SMYSER. Miss Corbett, since you have been there, has the board of visitors been in the ward where you are? Have you seen them?

Miss CORBETT. No, sir; I have never seen them. I think they have visited the building occasionally—not all of them, but a few of the members.

Mr. SMYSER. Have you ever had any talk with them?

Miss CORBETT. No, sir.

Mr. SMYSER. Does Doctor White visit the ward you are in?

Miss CORBETT. Very seldom.

Mr. SMYSER. Do any of the other physicians there visit the ward?

Miss CORBETT. Doctor Clark, who had charge of the female department, is supposed to visit it every morning; but I do not see him always, because I stay in my room a great deal, at work. I have my hands full.

Mr. SMYSER. Do you not have a separate room?

Miss CORBETT. Yes, sir; with my mother.

The CHAIRMAN. You have been taking care of your own room?

Miss CORBETT. Yes, sir. I have taken charge of everything about myself ever since I have been there. Even when my mother was ill I attended to her altogether.

The CHAIRMAN. You nursed her?

Miss CORBETT. Yes, sir.

Mr. HAY. What was the character of her illness?

Miss CORBETT. Soon after she was taken over the shock was so great and the humiliation, all together, that she had a slight stroke of paralysis, and she was ill for a number of weeks—very ill.

Mr. HAY. You have taken complete charge of her?

Miss CORBETT. Yes, sir. Occasionally I would have to call on the nurses to help me; but very seldom.

The CHAIRMAN. Have you seen this clergyman since you have been there? Has he called on you at the hospital at all?

Miss CORBETT. He has called several times. I think he called once when we were in cedar ward, and twice I think it was when we were in the L building; but I was out when he called. He met me when I was returning from taking a short walk one afternoon, as I was returning to the building. He was in the automobile with Mrs. Gardiner Hubbard and Doctor White, and he got out of the automobile and came toward me and spoke to me at that time.

The CHAIRMAN. Had you and your mother been in attendance at his church before you went there?

Miss CORBETT. Yes, sir; our letters were there, although we had not attended for some time.

Mr. HAY. Is there anything you desire to say yourself, Miss Corbett?

Miss CORBETT. Well, only of the injustice of the whole proceeding—of being taken out of our home in the way we were. And then we were taken to court after we had been in St. Elizabeth's two weeks; and in three weeks' time the contents of the whole home were sold without our knowledge, and sold for a very small sum, and our effects distributed all over. Of course that naturally affected us very much. And then they told us after all our things were disposed of that unless we had money or a home to go to that that would affect our being allowed to go free. Of course we were thrown in the insane asylum without any justice, and while we were in there everything we had was disposed of.

The CHAIRMAN. And you think you were sent to the asylum upon the application of this Mr. Hamlin? Did you say Hamlin?

Miss CORBETT. Yes, sir; Hamlin. Yes, sir; I understood so, because a lady physician came to the hospital the Tuesday after the Saturday we were put in. She came over and said Doctor Hamlin had been trying to have her put us in for some time. She said she signed the paper Friday morning, and we were brought over Saturday afternoon. She said he said to her, he demanded that she should sign this paper, and he would go to Northfield until the whole affair blew over.

The CHAIRMAN. What is the name of the lady physician?

Miss CORBETT. Dr. Alice Burritt. Her office is on Fourteenth street, opposite the Portland.

Mr. HAY. Had you ever seen her before?

Miss CORBETT. Yes, sir.

Mr. HAY. Who sold these things you speak of?

Miss CORBETT. I think Doctor Hamlin gave the authority for them being sold. We had no understanding that they were to be sold.

Mr. HAY. You do not know who sold them?

Miss CORBETT. Mr. Fenning—Lawyer Fenning—was given authority—what they call the committee in charge of our affairs—and he sold them. He was the one who sold them.

The CHAIRMAN. Were you taken to court at one time, you yourself? After you went to the hospital were you taken to the district court here, the supreme court of the District?

Miss CORBETT. On the 24th of June. We were taken in on June 11, and the 24th we were taken to court; but we were not allowed any witnesses. The first question I asked the presiding officer was, could they allow any witnesses for us, and he said if the jury agreed; and he turned to the jury and asked them would they, but they shook their heads, and he said no. There were seven witnesses against us, and each one testified to the same thing. There were people in the room who wished to testify for us, and they would not allow it.

The CHAIRMAN. Who were the witnesses against you?

Miss CORBETT. Doctor Hamlin, Mr. Jenkins, Mr. Bradford, Doctor Burritt—

The CHAIRMAN. That was the lady physician you speak of?

Miss CORBETT. Yes, sir. And our executor, Mr. Wiber, and Doctor Gunion and Doctor Watkins.

The CHAIRMAN. None of these witnesses were connected with the hospital, were they?

MISS CORBETT. Not that I know of. Doctor Hamlin is on the board.

THE CHAIRMAN. Except Doctor Hamlin, who is a member of the board of visitors.

MISS CORBETT. Yes.

THE CHAIRMAN. But none of the others had any connection with the hospital, had they?

MISS CORBETT. Not that I know of.

MR. HAY. Doctor Hamlin, you say, is on the board?

MISS CORBETT. Yes, sir.

MR. HAY. What reason do you suppose Doctor Hamlin had to have you sent to the hospital?

MISS CORBETT. I do not know why he should have done it. There certainly was no reason.

MR. SMYSER. In that court proceeding, Miss Corbett, were you a witness for yourself?

MISS CORBETT. They allowed me to go to the stand after all the others had testified. Then the first question I asked was if they would allow any witnesses for me, and they refused.

MR. SMYSER. Did you take the stand as a witness and testify?

MISS CORBETT. The presiding officer asked me a few questions.

MR. SMYSER. Was your mother there?

MISS CORBETT. Yes, sir.

MR. SMYSER. Did they ask her any questions?

MISS CORBETT. Yes, sir.

MR. SMYSER. And she testified also as a witness?

MISS CORBETT. Yes, sir.

MR. SMYSER. But they did not allow you to call any witnesses in your behalf?

MISS CORBETT. No, sir.

MR. HAY. Was that the only time you were ever in court, Miss Corbett?

MISS CORBETT. No, sir. A little while ago, before Christmas, I think it was, they tried to get us out on a writ of habeas corpus, but they failed.

MR. HAY. You were in court then, were you?

MISS CORBETT. Yes, sir.

MR. HAY. Who gave evidence then?

MISS CORBETT. Doctor Hamlin and several others. I think Doctor Clark and Mr. Fenning, the lawyer—no; I don't think he gave any testimony.

MR. HAY. You do not know how much the personal property was sold for, do you? You do not know how much it brought?

MISS CORBETT. Yes, sir; they told us it was sold for nearly \$500.

MR. HAY. What kind of personal property was it?

MISS CORBETT. We had very valuable paintings, pictures, books, and some rare pieces of furniture and bric-a-brac. They sold an organ for \$40 that cost over \$400. One painting cost \$1,500; and we had a great many rare things, heirlooms, and personal property—even my writing desk. They sold the desk and sorted out what letters they wanted to destroy and gave me those that were of no use.

THE CHAIRMAN. Miss Corbett, how recently has it been necessary for you to have an attendant to assist you in the care of your mother?

MISS CORBETT. I have never had one.

The CHAIRMAN. Oh, yes; you said when your mother was ill.

Miss CORBETT. Yes.

The CHAIRMAN. When I say attendant I mean a nurse, of course. You take entire charge of your mother, do you?

Miss CORBETT. Entire charge. Being paralyzed—and she was a large woman—I had to have them help me sometimes to move her.

The CHAIRMAN. But with that exception you take entire charge of her?

Miss CORBETT. Yes, sir.

Mr. HAY. What do you do, Miss Corbett? Do you do anything?

Miss CORBETT. I am busy all the time. I embroider and do all kinds of fancy work, and I have made a great many things.

Mr. HAY. Do you paint?

Miss CORBETT. I did paint quite a good deal, but I have not, of course—of course you know the rooms there are very small. There is no place to keep anything. Then they sold nearly everything we had, except a few things; they sent a few things over.

Mr. HAY. Have you any piece of embroidery with you, or any work of that sort, that you do, Miss Corbett?

Miss CORBETT. I have this waist [indicating waist worn by witness] that I embroidered. That is one thing. But I have a great many other things, colored embroidery, in silk.

(At this point a large parcel was produced, and an elderly lady started to untie same.)

The CHAIRMAN. I do not think it is necessary to have that; do you, Mr. Hay?

Mr. HAY. No.

Mr. SMYSER. You have ocular proof. The lady says she did the work she has exhibited, and I have no doubt she is telling the exact truth about it. We can see with our own eyes what she can do.

A LADY BYSTANDER. It is a beautiful piece of work, gentlemen, if you want to see it.

The CHAIRMAN. I think that will be all to-day, Miss Corbett. We are very much obliged to you.

TESTIMONY OF EDGAR BALL.

EDGAR BALL, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. How old are you?

Mr. BALL. Thirty-three years old.

The CHAIRMAN. Do you live in the city of Washington?

Mr. BALL. Yes, sir.

The CHAIRMAN. How long have you lived here?

Mr. BALL. About fourteen years.

The CHAIRMAN. Were you ever employed in St. Elizabeth's?

Mr. BALL. Yes, sir.

The CHAIRMAN. When?

Mr. BALL. I went there in 1892.

The CHAIRMAN. How long were you there?

Mr. BALL. About eleven years.

The CHAIRMAN. You were employed in the hospital about eleven years?

Mr. BALL. Yes, sir.

The CHAIRMAN. That is, from 1892 to 1904—from July, 1892, to December, 1904; is that it?

Mr. BALL. Yes, sir.

The CHAIRMAN. What were your duties there?

Mr. BALL. I was an attendant there the best part of my time.

The CHAIRMAN. What part of the hospital were you employed in?

Mr. BALL. I was employed in what is known as the west side.

The CHAIRMAN. The west wing of the main building?

Mr. BALL. The west side of the main building.

The CHAIRMAN. What were your duties?

Mr. BALL. I was an attendant.

The CHAIRMAN. Did you take charge of patients?

Mr. BALL. Yes, sir.

The CHAIRMAN. What did you have to do; take general charge of them, take them in to their meals, and so forth?

Mr. BALL. Yes, sir; look after them.

The CHAIRMAN. Did you have to bathe them, too?

Mr. BALL. I have; yes, sir; certainly.

Mr. SMYSER. Tell us, generally, what your duties consisted of.

Mr. BALL. That was our duty, looking after them, cleaning the ward, taking care of the patients, bathing and feeding them—seeing that they were fed and clothed.

The CHAIRMAN. Did you know of any instances of cruelty there while you were there, to the patients?

Mr. BALL. I have seen some of it; yes, sir.

The CHAIRMAN. Will you name some specific case?

Mr. BALL. Well, I have seen several cases of men—

The CHAIRMAN. Will you name one? We will get them all after a while. I want you to name all you remember; I want to know when they took place and what was done.

Mr. BALL. I couldn't exactly tell you the time or the date.

The CHAIRMAN. When was the last one you saw—how long before you left the hospital? Was it a month or a year?

Mr. BALL. I don't like to speak of that.

The CHAIRMAN. You do not what?

Mr. BALL. I don't like to tell of those things.

The CHAIRMAN. Why? That is what we are here for.

Mr. HAY. Do you know anything about a man named Charles Anderson?

Mr. BALL. I do.

The CHAIRMAN. Tell us about that.

Mr. BALL. I know he was sick a considerable time before a doctor ever looked at him.

The CHAIRMAN. When was he there?

Mr. BALL. About the last part of my time he was there—the last year I worked there.

The CHAIRMAN. You say he was sick there for a considerable time without a doctor having looked at him?

Mr. BALL. He was sick about five days before he was looked at.

The CHAIRMAN. Do you mean to say that no doctor looked at him when he was first received in the hospital?

Mr. BALL. I don't know about that; this man was taken sick after he had been there some time.

The CHAIRMAN. You mean he had been in the hospital and he was taken ill?

Mr. BALL. Yes, sir.

The CHAIRMAN. Was his case reported to one of the physicians?

Mr. BALL. I reported it to the supervisor every morning; I taken his temperature every morning.

The CHAIRMAN. What was the matter with him?

Mr. BALL. I understood afterwards he had typhoid fever. He was taken off of the ward five days after. He was taken over to the hospital ward.

The CHAIRMAN. He was left absolutely without any medical treatment for five days?

Mr. BALL. None whatever; I know that no medicine was given him for five days.

The CHAIRMAN. Did you speak to the supervisor more than once?

Mr. BALL. Every morning. I taken his temperature every morning and every evening and showed it to the supervisor.

The CHAIRMAN. Who was the supervisor?

Mr. BALL. Mr. Burch—Charles Burch.

The CHAIRMAN. Is he there still?

Mr. BALL. I don't know, sir. I have been away two years and a half.

The CHAIRMAN. Was he there at the time you left?

Mr. BALL. Yes, sir.

The CHAIRMAN. Did you see Doctor White in the ward where you were?

Mr. BALL. Yes, sir.

The CHAIRMAN. Did he come there frequently?

Mr. BALL. Well, once in a while he did. He came through on Sundays.

The CHAIRMAN. Did the other doctors come there frequently?

Mr. BALL. Sometimes it would be a couple of weeks before we seen them. I have seen it go as high as two weeks without seeing a doctor in the ward.

The CHAIRMAN. Do you know the names of the doctors whose duty it was to attend to your particular ward?

Mr. BALL. Doctor Stack had charge of that side of the house, I understood, in my time. There were some young physicians under him—Doctor Hummer and several others.

The CHAIRMAN. How often were the days when the boards of visitors came to inspect the hospital?

Mr. BALL. I understood it was every month, but we never often saw them.

The CHAIRMAN. You never saw them?

Mr. BALL. Very seldom we ever saw them.

The CHAIRMAN. Why?

Mr. BALL. Those days we had to go out to take the men all out walking, around the hill, and when the board of visitors came through we didn't see them.

The CHAIRMAN. What do you mean?

Mr. BALL. We took them out of sight of the building, if possible.

The CHAIRMAN. Were you in the habit of taking the patients out of sight of the building every day in this way?

Mr. BALL. The majority of them we took out; yes. Some of them that were feeble and were not able to get along lively we didn't take out only on those days.

The CHAIRMAN. Who gave you instructions to take them all out on those days?

Mr. BALL. The supervisor.

The CHAIRMAN. This same man, Burch?

Mr. BALL. Yes, sir; Burch and Coombs.

The CHAIRMAN. Burch and who?

Mr. BALL. A man by the name of Coombs.

The CHAIRMAN. Were you ever there when the board of visitors went through the wards?

Mr. BALL. Not often.

The CHAIRMAN. Were you ever there?

Mr. BALL. I have been on Maple ward, or something like that, and have seen them when they were there.

The CHAIRMAN. Did you ever see any cruelty to any of the patients?

Mr. BALL. Well, I have; yes, sir.

The CHAIRMAN. Can you name some instances of it?

Mr. BALL. I don't like to.

The CHAIRMAN. Of course you do not like to. Nobody likes to go into this investigation, but we have all of us got to do it. Be kind enough to name some cases.

(No answer.)

The CHAIRMAN. Did you ever see a patient flogged? Why do you not help us out? You can save a great deal of time by telling.

Mr. BALL. I have. I have seen a man have to protect himself. When the attendants are there alone and a man would attack him he would have to do something. I have had to do that myself.

The CHAIRMAN. You have?

Mr. BALL. Yes; to protect myself.

The CHAIRMAN. Describe what you have done.

Mr. BALL. I have had a man try to take my keys away from me.

The CHAIRMAN. What have you done to them?

Mr. BALL. I had to take care of myself.

The CHAIRMAN. Did you hit him? Did you ever hit a patient yourself?

Mr. BALL. I got him down and choked him a little bit.

The CHAIRMAN. You think that sometimes it is necessary?

Mr. BALL. I had to do it. He would either do me or I would do him.

The CHAIRMAN. Did you ever put anybody in strait-jackets?

Mr. BALL. Yes, sir; I have.

The CHAIRMAN. Do you think they are necessary at times?

Mr. BALL. I have seen some men that would injure themselves if they wasn't put in them.

The CHAIRMAN. Do you know of any instances where they were put on unnecessarily?

Mr. BALL. I couldn't say that.

The CHAIRMAN. You couldn't say that?

Mr. BALL. No.

The CHAIRMAN. In many cases you know of it has been necessary to keep men from injuring themselves?

Mr. BALL. Yes, sir.

Mr. SMYSER. Is there any reason why you do not want to tell all you know?

Mr. BALL. No, sir; not that I am afraid, or ever expect to get my position back, because I don't ever expect to try that. But these men are respectable physicians at the present time——

Mr. SMYSER. Well, my dear boy, you know you held up your hand and swore that you would tell the truth, and the whole truth. You have some regard for your oath?

Mr. BALL. I told you I had done it; yes, sir.

The CHAIRMAN. Has anybody else done it that you know of that is now there employed?

Mr. BALL. No, sir.

The CHAIRMAN. How many men did you have charge of in one ward?

Mr. BALL. I have had as high as 52 or 53 men in White Ash Ward.

The CHAIRMAN. Were you the only attendant?

Mr. BALL. No; there would be one or two there sometimes. I have stayed on that ward half a day at a time myself, though, with 52 men. It is known as one of the hardest wards we had.

The CHAIRMAN. What class of patients did you have there?

Mr. BALL. They were very noisy, and known as scrappers and fighters.

The CHAIRMAN. They were scrappers?

Mr. BALL. They were scrappers, too; yes, sir.

The CHAIRMAN. Was there always a physician on duty at night?

Mr. BALL. Yes, sir.

The CHAIRMAN. Was the physician's duty just concerned with that particular ward you speak of, that had 50 or 52 people?

Mr. BALL. To which?

The CHAIRMAN. Was there one physician to each of the wards? Was there one physician to the ward where you had 50 people?

Mr. BALL. No, sir.

The CHAIRMAN. Where did the night physician stay?

Mr. BALL. He had charge of the whole hospital at night—all over the whole hospital, as I understand.

The CHAIRMAN. How could you have gotten him in case anybody was taken ill?

Mr. BALL. There is a 'phone to most all the wards. Towards the last there was a telephone in most of the wards. In the last two years, I think it was, they put up those 'phones, that I was there. Doctor Richardson put them up. Before that there was no way to get them if you were in the ward alone.

The CHAIRMAN. Have you ever been employed in any other hospital?

Mr. BALL. No, sir.

The CHAIRMAN. Is the condition under Doctor White as good as it was under Doctor Richardson?

Mr. BALL. No, sir.

The CHAIRMAN. It is not?

Mr. BALL. It was not when I left there.

The CHAIRMAN. What is that? Did you not have enough attendants?

Mr. BALL. No, sir; we were short of attendants.

The CHAIRMAN. You had more attendants in proportion to the number of patients in Doctor Richardson's time than Doctor White has now?

Mr. BALL. Yes, sir; when I left.

Mr. HAY. Was that owing to an increase in the number of patients?

Mr. BALL. An increase in patients?

Mr. HAY. Yes; were there more patients under Doctor White than there were under Doctor Richardson?

Mr. BALL. I think there was; yes, sir. We had more help under Doctor Godding than any other.

Mr. SMYER. Young man, have you told us all you know out there?

Mr. BALL. Yes, sir.

Mr. SMYER. You are not keeping back anything?

Mr. BALL. No, sir.

The CHAIRMAN. Did you ever see any unnecessary cruelty to patients there?

Mr. BALL. No; I don't think I would call it unnecessary. I have seen men, though, treating or handling a patient pretty rough.

Mr. SMYER. Now, why can you not describe that; what led to it? That is what we want to get at.

The CHAIRMAN. Do you know anything about anybody being badly treated with wet towels?

Mr. BALL. Yes; I have seen that happen.

The CHAIRMAN. Have you ever seen that done?

Mr. BALL. I have.

The CHAIRMAN. Have you ever done it yourself?

Mr. BALL. Yes.

The CHAIRMAN. How is it done?

Mr. BALL. They take a wet towel and twist it around a man's neck.

The CHAIRMAN. What do they do it for?

Mr. BALL. To make him behave himself, I suppose.

The CHAIRMAN. What did you do it for?

Mr. BALL. I had to do it, at times. I had no one to help me, and I would have to protect myself.

The CHAIRMAN. Did anybody ever tell you to do it?

Mr. BALL. I have had Supervisor Burch tell me to beat a patient. I have had him tell me to flog a patient—I suppose he meant to beat him. He told me to flog a patient and make him behave.

The CHAIRMAN. What was the patient doing at the time?

Mr. BALL. He was very excitable and cutting up. He told me to give him a good flogging if he didn't behave—a fellow by the name of Isaac Atherton.

The CHAIRMAN. Tell us about Atherton—is that the name?

Mr. BALL. Isaac Atherton; I think that is the name; something like that.

The CHAIRMAN. What was he doing?

Mr. BALL. He was very excitable and noisy and coming around and slapping other patients.

The CHAIRMAN. He was hitting people, too?

Mr. BALL. He would hit anybody.

The CHAIRMAN. How did you flog him?

Mr. BALL. I suppose I was a good bit better man than he was, is the only thing I know.

The CHAIRMAN. Did you use a strap, or a stick, or what?

Mr. BALL. I have used a strap. I used a strap on him.

Mr. SMYSER. Describe how you did it.

Mr. BALL. I just used the strap on him and made him behave.

Mr. SMYSER. You may have strapped him over the face or the legs or any place. Where did you strap him?

Mr. BALL. Not over the face. Around the back or the legs, or somethink like that, and the arms.

The CHAIRMAN. Did you finally subdue him?

Mr. BALL. I made him behave himself; yes.

The CHAIRMAN. Did you put a strait-jacket on him?

Mr. BALL. No, sir.

The CHAIRMAN. How often did this occur with this particular man?

Mr. BALL. Not often.

The CHAIRMAN. Was it once, or twice, or three times?

Mr. BALL. It only happened once with him, sir.

The CHAIRMAN. Did you ever see him hit by anybody else?

Mr. BALL. Yes; I have seen him hit by others.

The CHAIRMAN. Was he badly hurt?

Mr. BALL. No, sir.

The CHAIRMAN. What was it? Did you hit him in the buttocks with the strap? Is that what you did to him?

Mr. BALL. Yes.

The CHAIRMAN. Well, why do you not tell us about it?

Mr. HAY. Is that sort of thing usual throughout the hospital?

Mr. BALL. Sir?

Mr. HAY. Is that sort of treatment usual throughout the hospital?

Mr. BALL. Yes; it has been.

The CHAIRMAN. How often did it happen in that ward?

Mr. BALL. This strap work?

The CHAIRMAN. Yes.

Mr. BALL. Oh, I couldn't tell exactly. Whenever the strap was handy, I suppose the men would get it and put it to work.

Mr. SMYSER. How often was it handy, and how often would it be handled?

Mr. BALL. I couldn't say.

The CHAIRMAN. Did that happen every day?

Mr. BALL. Pretty near, in that ward.

The CHAIRMAN. That ward was a bad ward, was it?

Mr. BALL. A bad ward; yes, sir.

The CHAIRMAN. How many attendants were supposed to take care of 50 patients?

Mr. BALL. Four of us.

The CHAIRMAN. Four altogether. Were two on duty in the day-time and two on duty at night?

Mr. BALL. Four during the day; two at night and two off; and the next night that two was on and the other two was off.

The CHAIRMAN. You had complete charge of these men from morning until evening, took them to their meals, and saw that they were dressed?

Mr. BALL. Yes.

The CHAIRMAN. And everything else?

Mr. BALL. Yes, sir.

Mr. HAY. What specific instructions were given to you by the supervisor when the board of visitors came there?

Mr. BALL. He would tell us to clean up our ward and take our men out walking. Every man on the ward that could possibly be carried out would be carried out. People that were in bed sick for a few days, or something, would be taken down to another ward.

Mr. HAY. Why did they have to be taken away?

Mr. BALL. I never understood that part of it.

Mr. HAY. Did that occur every time they came out there?

Mr. BALL. Every day.

Mr. HAY. Every time the board came those instructions were given?

Mr. BALL. If the weather wasn't good—if it was snowing or raining or freezing or anything—

Mr. HAY. Suppose it was raining; what happened then?

Mr. BALL. We would have to try to keep them in.

Mr. HAY. Did the board come around and see them?

Mr. BALL. Not often; no, sir.

Mr. HAY. The board did not go through your ward?

Mr. BALL. No, sir. I was back in that side known as White Ash ward, I think, about five years, and I saw the committee in there once.

Mr. HAY. You saw the board of visitors in there once?

Mr. BALL. In five years. I think it was; yes, sir. That is where all the patients were, in there.

Mr. HAY. Were you discharged, or did you voluntarily resign?

Mr. BALL. I voluntarily resigned.

Mr. HAY. You voluntarily resigned?

Mr. BALL. I did.

Mr. HAY. Were any of the patients allowed to bathe in the same water used by others?

Mr. BALL. Yes, sir.

Mr. HAY. Patients bathed in the same water?

Mr. BALL. Yes, sir.

Mr. HAY. How often did that occur?

Mr. BALL. Most every bathing day, sir; every bathing day, I suppose.

Mr. HAY. Every bathing day?

Mr. BALL. Yes, sir.

Mr. HAY. Did that occur during the time Doctor White has been superintendent?

Mr. BALL. Yes, sir. We had to bathe them.

Mr. HAY. Does that occur in all the wards in which you served while you were there?

Mr. BALL. Yes, sir; only in Maple ward. I was there about eight months.

Mr. HAY. Why was it not done there?

Mr. BALL. There were very few men there and most of them were straight and behaved themselves. I was with Admiral Klitz for some months—I guess you have heard of him.

Mr. HAY. They were pretty straight and behaved themselves?

Mr. BALL. Yes, sir.

Mr. SMYSER. Did you know a patient there by the name of Klug?

Mr. BALL. I knew an attendant there by the name of Klug—Joe Klug.

Mr. SMYSER. What did you ever see him do to patients?

Mr. BALL. He wasn't any better than the rest of us.

Mr. SMYSER. Was he any worse?

Mr. BALL. No; I don't guess he could be very much worse.

Mr. SMYSER. Do you know anything about the provender you had there—the food?

Mr. BALL. Yes. I ate it. I helped to eat it, and I ought to know.

Mr. SMYSER. How was it?

Mr. BALL. It wasn't the best I had ever had.

Mr. SMYSER. What was wrong with it?

Mr. BALL. It wasn't cooked at times. It was cold. We got it cold and half cooked.

Mr. SMYSER. Was that also true of the food for the patients?

Mr. BALL. Yes, sir.

Mr. SMYSER. Did you ever call anybody's attention to it?

Mr. BALL. Oh, yes; we would have to go back to the kitchen very often and get more.

Mr. BARCHFELD. What was your salary as an attendant?

Mr. BALL. When I went there I got \$18. I got up as high as \$35. Doctor White cut me down to \$25, and that is why I left.

Mr. BARCHFELD. The food was not up to standard?

Mr. BALL. Well, toward the last, sir, it was not as good as under Doctor Richardson or under Doctor Godding.

Mr. BARCHFELD. How did you like your service there? Did you like to work at the institution?

Mr. BALL. I did at first, yes; but I got tired of it toward the last.

Mr. BARCHFELD. The average attendant does not serve twelve years there, does he?

Mr. BALL. No, sir.

Mr. BARCHFELD. How often did you apply these towels—this wringing-out process—throwing wet towels around a patient's neck?

Mr. BALL. Not very often.

Mr. BARCHFELD. Did you ever report that you did this work to the superintendent?

Mr. BALL. No, sir.

Mr. BARCHFELD. Did any of the supervisors ever see you do this?

Mr. BALL. No, sir.

Mr. BARCHFELD. It was just a little advantage you took yourself?

Mr. BALL. I had to do it; yes, sir.

Mr. BARCHFELD. Did you like to flog patients?

Mr. BALL. No, sir; I did not want to do it.

Mr. HAY. Did you say "flog" or "flob?"

Mr. BALL. Flob.

Mr. SMYSER. Out in our country they call it flog.

Mr. BALL. Well, I guess it is about the same.

Mr. BARCHFELD. When did you leave the institution?

Mr. BALL. The last day of December, I think—let's see—1904.

Mr. BARCHFELD. What are you doing now?

Mr. BALL. Railroading.

Mr. BARCHFELD. Railroading?

Mr. BALL. Yes, sir.

Mr. BARCHFELD. Are you a brakemen?

Mr. BALL. I have got a job as conductor now.

Mr. BARCHFELD. You say it was necessary at times to administer this treatment to these patients?

Mr. BALL. You would have to do it to protect yourself. A man would have to do something. He would have to fight or get out, that is all, and leave them without anyone.

Mr. BARCHFELD. You justify your course, do you?

Mr. BALL. Sir?

Mr. BARCHFELD. You think your course was perfectly justifiable, doing what you did over there—flogging them and wringing towels out, etc.?

Mr. BALL. I don't think that was justifiable; no, sir.

Mr. BARCHFELD. Still you would go and make an affidavit.

Mr. SMYSER. Did Doctor Stack know of your flogging or beating people?

Mr. BALL. No, sir.

Mr. SMYSER. I think Mr. Clark would like to have a copy of this testimony, and I think there ought to be a copy furnished him. A copy ought also to be furnished to Doctor White, perhaps, and to Mr. Evans.

The CHAIRMAN. We will have extra copies made, of course.

I think it is going to be necessary, as we said the other day, to have an additional clerk here. I do not think one man can do all the work. Did you not mention the fact, Mr. Smyser, that you had some one we could get for that purpose? Unless there is some objection, I would like to nominate whoever the man is.

Mr. SMYSER. It will be Mr. Given.

The CHAIRMAN. Do you approve of that, gentlemen?

Mr. HAY. That is a matter that is wholly within the province of the chairman.

The CHAIRMAN. Very well; will you notify him to come?

Mr. SMYSER. Yes.

The CHAIRMAN. How about holding a session to-morrow? The sergeant-at-arms would like to get the names of witnesses who are to be called for to-morrow as early as possible if we sit.

Mr. HAY. It suits me.

The CHAIRMAN. We will have a meeting to-morrow, and will go on again at half past 2 this afternoon.

The committee (at 12.20 o'clock p. m.) took a recess until 2.30 p. m.

AFTER RECESS.

The committee reassembled at the expiration of the recess.

TESTIMONY OF THORNTON O. PYLES—Continued.

The CHAIRMAN. Let it be noted in the record that J. H. Lloyd is the name of the man mentioned by Mr. Pyles, and that he is now at the Ozark Sanitarium, Hot Springs, Ark.

Is there any further testimony you want to give?

Mr. PYLES. I want to state that I understand Mr. Lloyd is still connected with the institution, and is away as a special attendant with one of the Norris Peters firm, I think.

The CHAIRMAN. That is, he is still connected with the Hot Springs sanitarium?

Mr. PYLES. No; over at the Government Insane Asylum. His patient went from there, from what I can understand, and I know that there is another employee with him, Mr. Knott. Those two are out caring for that patient at this sanitarium.

The CHAIRMAN. Where did you get that information?

Mr. PYLES. I got that information from some of the hospital employees.

The CHAIRMAN. All right; we will take that into consideration when we come to hear from Mr. Lloyd.

Mr. HAY. What did you say the other man's name was?

Mr. PYLES. Mr. Harry Knott.

STATEMENT OF GEORGE W. BASTEN.

GEORGE W. BASTEN, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. Is your name George W. Basten?

Mr. BASTEN. Yes, sir.

The CHAIRMAN. Where do you reside?

Mr. BASTEN. At the Soldiers' Home.

The CHAIRMAN. In this city?

Mr. BASTEN. Yes, sir; the District of Columbia.

The CHAIRMAN. Were you ever an inmate of the Government Hospital for the Insane?

Mr. BASTEN. Yes, sir; twice.

The CHAIRMAN. When, please?

Mr. BASTEN. The first time was the 22d day of September, 1888.

The next time was—

The CHAIRMAN. How long did you stay there that time?

Mr. BASTEN. I was there about three years and six months.

The CHAIRMAN. Until April, 1893?

Mr. BASTEN. Yes, sir.

The CHAIRMAN. Were you there then as a patient?

Mr. BASTEN. Yes, sir; up until that time.

The CHAIRMAN. During that period of time, from 1888 to 1893, you were there as a patient, were you?

Mr. BASTEN. Yes, sir; I went to work there the 1st of April, 1893, as a barber, and worked there until the 5th day of November, 1897.

The CHAIRMAN. In other words, you were discharged as a patient and you became a regular employee of the hospital?

Mr. BASTEN. Yes, sir.

The CHAIRMAN. Did you leave the institution voluntarily?

Mr. BASTEN. No, sir; I was discharged.

The CHAIRMAN. Was that when Doctor White was there?

Mr. BASTEN. No, sir; Doctor Godding.

The CHAIRMAN. Do you know anything about the hospital under the management of Doctor White?

Mr. BASTEN. I do, some; y

The CHAIRMAN. Have you been there?

Mr. BASTEN. Yes, sir; I have been connected there in 1903, when he was superintendent.

The CHAIRMAN. When were you discharged?

Mr. BASTEN. The 9th of last June.

Mr. HAY. Were you discharged as cured?

Mr. BASTEN. Yes, sir; I was supposed to be.

The CHAIRMAN. Do you mean you went back the second time as a patient?

Mr. BASTEN. Yes, sir.

The CHAIRMAN. What were your duties when you were there as an employee?

Mr. BASTEN. I done the shaving there and hair cutting for the inmates. Then I worked for the employees after I would get through working for the Government.

The CHAIRMAN. Were you paid by the employees?

Mr. BASTEN. Yes, sir; I got \$30 from the Government. Then I was paid personally by the employees.

The CHAIRMAN. You did that outside of the time you were there working for the Government?

Mr. BASTEN. Yes, sir.

The CHAIRMAN. How did you come to go there? Did you go there voluntarily or were you sent there by some process?

Mr. BASTEN. I was sent there. I broke down from an operation I had performed for appendicitis. I got so I could hardly get around. That was the last time I went back there.

The CHAIRMAN. Were you regularly committed there?

Mr. BASTEN. Yes, sir.

The CHAIRMAN. On your own application?

Mr. BASTEN. No, sir; I was sent there by the court.

The CHAIRMAN. But who made the application to the court to have you committed there?

Mr. BASTEN. I suppose it was the doctor down at the Washington Asylum.

The CHAIRMAN. Were you in the Washington Asylum?

Mr. BASTEN. I was. I was sent from the first precinct station down there. I was down there, I guess, four or five days.

The CHAIRMAN. Did you have an operation at the Washington Asylum?

Mr. BASTEN. No; I had the operation performed three years ago this last March, up here in the Columbia Hospital. Dr. Ford Thompson performed the operation.

The CHAIRMAN. What do you know about the treatment of the patients there in the hospital while Doctor White was superintendent?

Mr. HAY. I would like to ask him a question before you get to that.

The CHAIRMAN. Certainly.

Mr. HAY. Mr. Basten, you are a discharged soldier from the Army?

Mr. BASTEN. Yes, sir.

Mr. HAY. Honorably discharged?

Mr. BASTEN. Yes, sir.

Mr. HAY. What was the cause of your discharge?

Mr. BASTEN. I was discharged on a surgeon's certificate of disability.

Mr. HAY. Do you draw a pension?

Mr. BASTEN. I do.

Mr. HAY. That is all. I just wanted to fix the status.

The CHAIRMAN. What do you know about the treatment of patients at the hospital since Doctor White has been there?

Mr. BASTEN. I have seen patients mistreated.

The CHAIRMAN. How?

Mr. BASTEN. I have seen patients abused, shoved around, slapped, choked, and kicked. Of course I don't know whether Doctor White knows anything about that or not, personally.

The CHAIRMAN. Tell us what you saw in connection with any patient, mentioning the name of the patient and who the attendant was, and fixing as near the time as possible.

Mr. BASTEN. There was one man, Jones, over there——

The CHAIRMAN. Do you know his first name?

Mr. BASTEN. No; I do not.

The CHAIRMAN. Do you know about when this was?

Mr. BASTEN. This was along about the latter part of December.

The CHAIRMAN. Of 1905?

Mr. BASTEN. 1903.

Mr. HAY. Was Jones a patient or was he an attendant?

Mr. BASTEN. He was a student there, studying medicine, studying for a doctor.

The CHAIRMAN. Did he abuse somebody?

Mr. BASTEN. Yes, sir; he abused a patient there. He shoved him down and kicked him and told him if he didn't lay in bed he would kill him.

The CHAIRMAN. He would what?

Mr. BASTEN. He would kill him. He said: "God damn you, if you get up there again I will kick the guts out of you." That is just what he said.

The CHAIRMAN. Do you know who the patient was?

Mr. BASTEN. No; I couldn't say.

The CHAIRMAN. What ward was this in?

Mr. BASTEN. This was on Oak ward.

The CHAIRMAN. Were you an attendant at the hospital then, or a patient?

Mr. BASTEN. No, sir; I was a patient.

The CHAIRMAN. Were you and this man Jones said this to both in the same ward?

Mr. BASTEN. He was night nurse and I was a patient.

The CHAIRMAN. Jones was a night nurse?

Mr. BASTEN. Yes, sir.

Mr. BARCHFELD. And you were day nurse?

The CHAIRMAN. No, sir; he was a patient. Do you know of any other particular case you want to mention now?

Mr. BASTEN. There are several cases there that happened, but I didn't know the patient's name.

The CHAIRMAN. Did you know the attendant's name?

Mr. BASTEN. No; I don't believe I do, not under Doctor White himself. The most I know about that hospital was from 1888 up to 1893.

The CHAIRMAN. Do you think the hospital is better now than it was when you were there first?

Mr. BASTEN. I can't see any difference in the food. I don't think the food is fit for an insane man to eat, if he is insane.

The CHAIRMAN. What was the matter with it?

Mr. BASTEN. It is no good.

The CHAIRMAN. Do you mean to say the meat is bad?

Mr. BASTEN. The meat is tough. I have got good teeth, and I can't eat it.

The CHAIRMAN. How about the vegetables?

Mr. BASTEN. The vegetables were as good as could be expected.

The CHAIRMAN. Was the cooking pretty good?

Mr. BASTEN. Sometimes the cooking was pretty good and sometimes it wasn't.

The CHAIRMAN. How about the beans?

Mr. BASTEN. I have seen beans there that wasn't half cooked.

The CHAIRMAN. What do you know about the baths?

Mr. BASTEN. I have seen patients there bathe in the same water, five and six of them.

The CHAIRMAN. Where did you see that?

Mr. BASTEN. I seen it right in the oak ward.

The CHAIRMAN. Do you mean that when one patient got through using the bath tub the water was not run out, but another patient bathed in the same water?

Mr. BASTEN. That is just exactly what I mean.

The CHAIRMAN. How often did you see that?

Mr. BASTEN. I have seen that as high as half a dozen times.

Mr. SMYSER. How did that happen?

Mr. BASTEN. It happened because the attendant didn't let the water out. That is how it happened.

The CHAIRMAN. How do they bathe them? Do they bring several patients into the room at the same time, and when they get through bathing one put another one in the same tub of water?

Mr. BASTEN. That is what they do.

The CHAIRMAN. Who was the attendant who was responsible for that; do you know?

Mr. BASTEN. I think it must have been the head attendant.

The CHAIRMAN. Who was he?

Mr. BASTEN. I think his name was Martin, if I am not mistaken.

The CHAIRMAN. When was it you say that?

Mr. BASTEN. This was 1903.

The CHAIRMAN. Did that happen every time you went in to take a bath there?

Mr. BASTEN. No; it didn't happen every time I went in to take a bath, because sometimes I went in and taken a bath by myself. I always got clean water for myself, because I always looked out for it.

The CHAIRMAN. Did you ever take any of the spray baths—the needle baths?

Mr. BASTEN. Yes, sir.

The CHAIRMAN. How were those conducted?

Mr. BASTEN. They were conducted all right—after you got them.

Mr. SMYSER. After what?

The CHAIRMAN. What do you mean by after you got them?

Mr. BASTEN. It was sometimes after I got there before I asked for them.

The CHAIRMAN. Do you mean you did not get them as often as you wanted them?

Mr. BASTEN. I did—after I got them; it was two weeks before I got them. I spoke to Doctor Hummer a couple of times about it, and finally he come to me and said he had got them arranged.

The CHAIRMAN. After that you got them, did you?

Mr. BASTEN. Yes, sir; I went over and taken one whenever I wanted to.

The CHAIRMAN. You liked those baths, did you not?

Mr. BASTEN. Yes, sir; I would go over there every day.

The CHAIRMAN. Did you ever see the Board of Visitors come there?

Mr. BASTEN. I never spoke to one of them in my life.

The CHAIRMAN. I asked you if you ever saw them there.

Mr. BASTEN. I have seen them go through there; I never met any of them.

The CHAIRMAN. How often did they come?

Mr. BASTEN. They generally come about once a month.

The CHAIRMAN. Did the superintendent come around among the wards?

Mr. BASTEN. Sometimes he did, but I never seen him go through there when the men were eating.

The CHAIRMAN. You mean that while they were actually at their meals you did not see him go through there?

Mr. BASTEN. That is what I have reference to; yes, sir.

The CHAIRMAN. Did you ever make any complaints to Doctor White in regard to any of these things you speak of?

Mr. BASTEN. No, sir.

The CHAIRMAN. Did you ever make any complaints to anybody?

Mr. BASTEN. No, sir; I didn't think it was any use to.

The CHAIRMAN. Did the other doctors come around frequently?

Mr. BASTEN. Oh, yes; I have seen Doctor Hummer go through there when they were eating.

The CHAIRMAN. Was there a doctor whose special duty it was to take charge of the oak ward where you were?

Mr. BASTEN. I think Doctor Stack had charge of it. Doctor Stack had charge of the west side.

The CHAIRMAN. Did he go through often?

Mr. BASTEN. Yes; I have seen him on the ward half a dozen times a day.

The CHAIRMAN. Did the superintendent or any of the doctors usually inspect the food when they came in there?

Mr. BASTEN. Not that I seen.

The CHAIRMAN. Did anybody ever inspect the food?

Mr. BASTEN. I never seen nobody inspecting any food.

The CHAIRMAN. Did you ever see any of the visitors inspect the food in any way?

Mr. BASTEN. No, sir.

The CHAIRMAN. The board of visitors?

Mr. BASTEN. No, sir.

The CHAIRMAN. Did you ever see them in the room when the patients were dining?

Mr. BASTEN. Not when they were eating.

The CHAIRMAN. Did you ever see any other patients badly treated, except those you have mentioned?

Mr. BASTEN. No; not under Doctor White.

The CHAIRMAN. Was the treatment more brutal under Doctor Godding than it was under White?

Mr. BASTEN. I should say it was—on those back wards over there.

The CHAIRMAN. Did you go into the back wards, too?

Mr. BASTEN. I was on one of the violentest wards there was over there.

The CHAIRMAN. Do you mean they were the most violent patients over there?

Mr. BASTEN. Yes, sir.

The CHAIRMAN. What ward was that?

Mr. BASTEN. That was a ward called "White Ash."

The CHAIRMAN. But you say it was better under Doctor White than it was under Doctor Godding?

Mr. BASTEN. I wasn't back on those wards under Doctor White. I was in a ward called "Oak Ward," a ward called "Relief 3," and the last I was on was a building called "Atkins Hall," on the second floor.

The CHAIRMAN. Did you ever know Doctor Jones to maltreat patients, except this one you speak of—that he talked to when the patient was in bed?

Mr. BASTEN. No; I don't know that I do.

The CHAIRMAN. Did you ever see any of the doctors illtreat a patient?

Mr. BASTEN. No; I couldn't say I ever did.

The CHAIRMAN. What attendants did you ever see illtreating patients?

Mr. BASTEN. Under Doctor White, you mean?

The CHAIRMAN. Yes.

Mr. BASTEN. There was an attendant discharged over there—I can't call his name—for blacking a patient's eye. I think the patient was on relief 5. I can't call the attendant's name, though.

The CHAIRMAN. When was this—when did it happen?

Mr. BASTEN. This happened just a few months before I left there, I reckon.

The CHAIRMAN. That was in 1905?

Mr. BASTEN. Yes.

The CHAIRMAN. Did you ever see any of the attendants hit the patients with straps?

Mr. BASTEN. Oh, yes. There used to be a patient come out on the hall there, an old voluntary soldier. He had a strap on, about that long [indicating]. He would hit him on the skin of the neck and tell him to get back in the room.

The CHAIRMAN. That did not hurt very much, did it?

Mr. SMYSER. Who did that?

Mr. BASTEN. A gentleman by the name of Ford.

The CHAIRMAN. Was he an attendant?

Mr. BASTEN. Yes, sir; he was an attendant.

The CHAIRMAN. Did it seem to hurt the patient very much when that was done?

Mr. BASTEN. A strap about 6 inches long—you hit a man up in the skin of the neck with it, and I should think it would hurt.

The CHAIRMAN. Did you ever see any towels put around the patients' necks?

Mr. BASTEN. Not under Doctor White.

The CHAIRMAN. Did you ever see any patients dressed in canvas suits?

Mr. BASTEN. Under Doctor Godding I did. I wore them myself. I wore a strait-jacket.

The CHAIRMAN. What did they put those on the patients for?

Mr. BASTEN. I suppose they were violent, and afraid of them.

The CHAIRMAN. These canvas suits that they put on did not hurt the patients, did they?

Mr. BASTEN. If you get one on that is too short for you, and lace it up, I should think it would kind of hurt you in the crotch.

The CHAIRMAN. Usually speaking, they did not hurt the patient, did they?

Mr. BASTEN. I never seen any one that had any fit to it.

Mr. SMYSER. That is, they were not made to fit the patient?

Mr. BASTEN. No; they would put a big rope in behind and lace you up—keep on pulling. They had eyelets in them.

The CHAIRMAN. How about these strait-jackets? They were made of canvas, also, were they not?

Mr. BASTEN. Yes, sir.

The CHAIRMAN. Were those the ones that had long sleeves?

Mr. BASTEN. Yes, sir.

The CHAIRMAN. And they tied the sleeves around behind the back, did they not?

Mr. BASTEN. Yes, sir.

The CHAIRMAN. Was that apt to hurt the patient very much?

Mr. BASTEN. If you lay with your arms up that way all night [indicating], and you are tied behind, you can't move.

The CHAIRMAN. What did they put those things on for?

Mr. BASTEN. They had one man there, a German fellow. They claimed that he stuffed the water-closet up. That is the reason they put it on him.

The CHAIRMAN. When did that happen?

Mr. BASTEN. That happened under Doctor Godding.

The CHAIRMAN. Did you ever see any of these strait-jackets put on patients during Doctor White's administration?

Mr. BASTEN. No, sir; I never did.

The CHAIRMAN. Have you ever seen the feeding tubes?

Mr. BASTEN. Oh, yes.

The CHAIRMAN. How did they use those?

Mr. BASTEN. They used them in different ways.

The CHAIRMAN. What does a feeding tube look like?

Mr. BASTEN. I don't know whether I can describe it. It has a tube on it about that long, maybe [indicating], or a little bit longer.

The CHAIRMAN. What is it made of?

Mr. BASTEN. I guess it would be made out of different materials.

The CHAIRMAN. Any tube that you remember—what was it made of?

Mr. BASTEN. It looked like an ordinary small pitcher to me with a spout on it about that long.

The CHAIRMAN. Was it made of glass or china or rubber?

Mr. BASTEN. This looked to me like it was made with china, the one I seen.

The CHAIRMAN. Where did they put the spout?

Mr. BASTEN. I have seen them put it in their mouth sometimes, and I have seen them put it in their nose sometimes.

The CHAIRMAN. What did they use those feeding tubes for? Do you know?

Mr. BASTEN. I supposed it to be on account of because the patient couldn't eat his food. I don't know what else.

The CHAIRMAN. It was pretty hard work, was it not, to feed a patient with one of those tubes?

Mr. BASTEN. Well, I should think so.

The CHAIRMAN. You could not imagine anybody doing that in preference to letting the patient eat his own food, could you?

Mr. BASTEN. How is that?

The CHAIRMAN. Can you imagine any attendant using one of these feeding tubes rather than let the patient eat by himself?

Mr. BASTEN. I should think I would let him go until he ate himself rather than to force it down that way.

The CHAIRMAN. But was not the only reason they used the tube because the patient would not eat, and they were afraid he would starve to death?

Mr. BASTEN. I don't know. I don't think a man would starve to death. I think he would eat before he would starve to death, because I seen a man over there named Jim Tow that went fifteen days and didn't eat a bite.

The CHAIRMAN. Did they not use the feeding tube with him?

Mr. BASTEN. No, sir; this was when I was there under Doctor Godding the first time.

The CHAIRMAN. What sort of milk did they have there? Did they have any milk with their oatmeal?

Mr. BASTEN. It is very seldom I see milk.

Mr. SMYSER. Tell us what you did see.

The CHAIRMAN. How did they serve the oatmeal?

Mr. BASTEN. It was a very few times I ever seen milk with it.

The CHAIRMAN. Did they give you sugar with it?

Mr. BASTEN. Very few times I seen it with sugar.

The CHAIRMAN. Was the oatmeal itself good?

Mr. BASTEN. No; it was too thin.

The CHAIRMAN. By "too thin" do you mean it was gruel?

Mr. BASTEN. It was as thin as slop. I have seen it as thin as slop. You know how thin slop is.

The CHAIRMAN. How about the tea and coffee? Did you have any decent tea or coffee?

Mr. BASTEN. I never seen any.

The CHAIRMAN. Neither when you were an attendant or when you were a patient did you ever see any good tea or coffee out there?

Mr. BASTEN. Not what we call good out there at the Home.

The CHAIRMAN. Is that so under Doctor Gooding and Doctor White both?

Mr. BASTEN. Yes, sir.

The CHAIRMAN. What do you know about Captain Waters on Thanksgiving, 1904?

Mr. BASTEN. I know he made the remark to—now I didn't hear him make this remark.

The CHAIRMAN. Didn't you?

Mr. BASTEN. No; but he told me and others told me that he made the remark that Teddy was in the White House eating bread and honey and White was in the red house stealing all the money.

The CHAIRMAN. That is what this Captain Waters said, was it? That is, he told you he had said so?

Mr. BASTEN. Yes; and others told me he said the same thing. Mind you, I didn't hear him tell Doctor Stack this.

Mr. HAY. Who is Captain Waters?

The CHAIRMAN. He was a patient, was he not?

Mr. BASTEN. Yes, sir.

Mr. SMYSER. What did he say about John Wanamaker running the Sunday school?

Mr. BASTEN. I disremember that.

The CHAIRMAN. Do you think they have enough attendants there?

Mr. BASTEN. No, sir.

The CHAIRMAN. Do you think that is the main matter with the hospital, that they have not enough attendants?

Mr. BASTEN. They haven't got attendants enough and they don't pay them enough money. There is a gentleman sitting right behind you there that worked on a ward over there that was worth a hundred dollars a month to work on. His name is Mr. Kearney; sitting right behind you.

The CHAIRMAN. Do you mean because he worked in a ward where there is a great deal of trouble in managing patients?

Mr. BASTEN. Certainly. Why, when I was there under Doctor Godding I was on white ash. There was a holy terror in there. That man will tell you himself. There was a man in there he couldn't handle.

The CHAIRMAN. That was one man in there he could not handle?

Mr. BASTEN. Yes, sir.

The CHAIRMAN. Why?

Mr. BASTEN. That man will tell you I have taken men off him.

The CHAIRMAN. Off of who?

Mr. BASTEN. Mr. Kearney, sitting right back there

The CHAIRMAN. Whom did you take off?

Mr. BASTEN. A patient.

The CHAIRMAN. What was he doing?

Mr. BASTEN. He was giving him a good thumping, and he would have given him a better one, I guess, if I hadn't taken him off.

The CHAIRMAN. Why did you interfere?

Mr. BASTEN. I didn't want to see the man mangled up.

The CHAIRMAN. Did the patients frequently attack the attendants in the hospital?

Mr. BASTEN. Oh, yes; very frequently.

The CHAIRMAN. Some of the patients were pretty bad characters, were they not? They were scrappers?

Mr. BASTEN. You bet they were scrappers.

The CHAIRMAN. And some of the patients, I suppose, had to be treated pretty roughly to save the attendants from getting badly hurt, did they not?

Mr. BASTEN. Yes; I will admit that; but then they can give you medicine over there that will make you feel like you can bust a hog chain.

The CHAIRMAN. What do you mean by that?

Mr. BASTEN. What do I mean by that?

The CHAIRMAN. Yes.

Mr. BASTEN. It will make you feel like you would turn a house over.

The CHAIRMAN. Do you mean to say that over there in the hospital they give patients medicine so as to make them feel like busting a hog chain?

Mr. BASTEN. That is exactly what I mean. The first dose of medicine I ever taken over there I felt the effects of it.

The CHAIRMAN. You mean you felt very strange?

Mr. BASTEN. Yes.

The CHAIRMAN. And you were able to——

Mr. BASTEN. I will just ask you a question. Here is the idea: They give a man medicine over there that will put him in this fix, and then they don't give him what human nature calls for. You can guess at the rest of it.

The CHAIRMAN. I can not guess at the rest of it. What do you mean by that?

Mr. BASTEN. That is, to associate with the female sex.

The CHAIRMAN. You mean to say they give them medicine so as to make them feel like they must associate with the female sex, and then don't give them the female so that they can associate with them?

Mr. BASTEN. That is what I mean.

The CHAIRMAN. What doctor ever gave such medicine as that?

Mr. BASTEN. If you don't believe it you go over there and get locked once.

Mr. SMYSER. I think the remedy would be to have two doctors, one to administer the medicine and the other to supply the other part of it.

Mr. BASTEN. Now, I will ask you a question. Suppose you were over there as a patient. Supposing you had a good deal of sense, the same as I did myself. I never seen a day yet that I didn't know what I was doing. I know when the sun rises and when it sets. Supposing three or four big attendants, weighing all the way from 200 to 250—about four of them—would grab you and throw you down, the same as a horse, and hold you, and then a supervisor would come along and blister you with some caustic, blister your penis—that is what I am talking about—and it would swell up just about like that [indicating].

The CHAIRMAN. Did you ever see that done?

Mr. BASTEN. It was done on me.

The CHAIRMAN. What for? Had you had anything the matter with you? Was there anything the matter with your penis?

Mr. BASTEN. No, sir.

The CHAIRMAN. What did they do it for?

Mr. BASTEN. I kicked the medicine tray out of a supervisor's hand over there one morning, named Butler. He come through the ward, and I asked him for an envelope and a sheet of paper, and he gave me

the horse laugh, and I give the medicine tray a kick, and I kicked it clear through the hall. About an hour after that they come around with a piece of brash about that long, and a fellow by the name of Mondell and a fellow by the name of Brown, and that gentleman sitting right behind you there, Mr. Kearney, and one or two others. They threw me, and he applied the brash.

The CHAIRMAN. He applied what?

Mr. BASTEN. This caustic they blister you with. They put it on right behind the head of the penis.

The CHAIRMAN. Do you mean to say that anybody in that hospital ever did that to man who was perfectly well, and that it was not necessary for medical purposes to apply that blister to you?

Mr. BASTEN. If that ain't so there ain't a God in heaven.

Mr. SMYSER. When was that?

Mr. BASTEN. That was under Doctor Godding.

Mr. SMYSER. How far back? When was it?

Mr. BASTEN. That was in 1889, I think.

The CHAIRMAN. Were you ever maltreated personally when Doctor White was superintendent of the hospital?

Mr. BASTEN. No, sir.

The CHAIRMAN. And you really did not have any complaint at all to make?

Mr. BASTEN. I was pretty badly broken up when I went back there.

The CHAIRMAN. Were you better when you went out?

Mr. BASTEN. Oh, yes; considerably better.

Mr. SMYSER. When you were blistered on this occasion, was there anything the matter with you?

Mr. BASTEN. No, sir.

Mr. SMYSER. Had you been wanting a woman?

Mr. BASTEN. That is what I wanted.

Mr. SMYSER. And had the blistering anything to do with your desire to have a woman?

Mr. BASTEN. That I couldn't say. I never seen the time yet when I would hurt a woman, but I have seen the time when I would kill a man.

TESTIMONY OF MERVIN A. DADDYSMAN.

MERVIN A. DADDYSMAN, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. Mr. Daddysman, were you a patient in St. Elizabeth's?

Mr. DADDYSMAN. Yes, sir.

The CHAIRMAN. When did you go there?

Mr. DADDYSMAN. I was there twice. I was there year before last and last year. The first time I was there I was there six weeks, and my wife came and took me away. The next time I went back was last February a year ago.

The CHAIRMAN. Where were you the first time you were there—in what ward?

Mr. DADDYSMAN. I was on Sycamore ward most of the time.

The CHAIRMAN. What was the matter with you? Why did you go there?

Mr. DADDYSMAN. I was inclined to be a little melancholy—sick—and I went over there for treatment.

The CHAIRMAN. And your wife took you there?

Mr. DADDYSMAN. She had me put over there; yes, sir.

The CHAIRMAN. You were treated after you went there, were you?

Mr. DADDYSMAN. No medical treatment to amount to anything. In fact, I merely just wanted a rest. I had been working pretty hard and overtaxed myself in work, and just went over there for a rest.

The CHAIRMAN. The first time you went there, were you ever badly treated by any of the attendants?

Mr. DADDYSMAN. No; none whatever. I had very good treatment the first time I was there—very good.

The CHAIRMAN. You came out better?

Mr. DADDYSMAN. Yes, sir; I felt much better every way.

The CHAIRMAN. The next time you went there you say was in February, 1905?

Mr. DADDYSMAN. Yes, sir.

The CHAIRMAN. Did anything unpleasant happen there then?

Mr. DADDYSMAN. Yes, sir.

The CHAIRMAN. What happened?

Mr. DADDYSMAN. A fellow by the name of George Weedon, he made about the first attempt there. Of course it was uncalled for, but nevertheless he took the authority and done it.

The CHAIRMAN. What did he do?

Mr. DADDYSMAN. He grabbed me around the neck and choked me.

The CHAIRMAN. What with?

Mr. DADDYSMAN. With his arm. He took me unbeknownst to me. He merely asked me to move a chair. I moved the chair, and I didn't just exactly suit him the way he wanted. So he just wrapped his arms around my neck and choked me. In the meantime I caught my tongue in between my teeth and I couldn't holler. I was practically an invalid. I couldn't defend myself. Of course another patient in there, he helped to get me released.

The CHAIRMAN. Another patient helped you, you say?

Mr. DADDYSMAN. Yes, sir; he caught hold of him, to help him to release me.

The CHAIRMAN. Did you ever make any complaint of this?

Mr. DADDYSMAN. No, sir; I never made no complaint whatever. In fact, I didn't know where the orders come from or anything else. I was practically ignorant of orders, the doings there, and of course there was so many things going on and said around there that I was just practically trying to hold my own, just to clear myself.

The CHAIRMAN. Did you know any of the doctors there?

Mr. DADDYSMAN. I was not personally acquainted with any of the doctors, only Doctor Glascock. Of course I know Doctor White when I seen him, and Doctor Stack.

The CHAIRMAN. Did any of the doctors attend you at all and ask you how you were and look you over?

Mr. DADDYSMAN. No; there was no questions asked me at all. Of course, after I was choked, Doctor Stack came around and said, "Let's see your tongue." I judge somebody said something to him in regard to it. He looked at my tongue, and my tongue was all swollen.

The CHAIRMAN. Did you tell him how it happened?

Mr. DADDYSMAN. No, sir.

The CHAIRMAN. Why did you not tell him that?

Mr. DADDYSMAN. Those fellows there told me if I opened my mouth about anything it would make it that much harder for me.

The CHAIRMAN. Who told you that?

Mr. DADDYSMAN. Weedon. He said: "If you open your mouth I will make it that much harder for you." Of course I was looking out for myself. I didn't want to create any sensation or any trouble. They seemed to have the right of way there, some how or another. So after that I wanted to mail a letter, and I sealed it and had a stamp on it, and they wouldn't accept it unless it was opened. I says: "I am going to get that letter through some way or another." So one day there was a lot of visitors out there, and they happened to leave the back door open, and I walked out and started for downtown. I took French leave, so they overtook me and brought me back.

The CHAIRMAN. Where did you go then? What ward were you put in then?

Mr. DADDYSMAN. They put me into Gray Ash. I was in there a while, and they was knocking one another around there in different ways. When I first went in, the very day I went in, I sat on a little table, and Hogan came up and says: "I have got a good notion to punch you."

The CHAIRMAN. Who said that?

Mr. DADDYSMAN. A fellow by the name of Bob Hogan.

The CHAIRMAN. Was he an attendant?

Mr. DADDYSMAN. Yes, sir; he had charge of that ward. He says: "I have got a good notion to punch you." I says, "You want to be careful what you are doing before you do." So he didn't do it. Then that night he got a revolver out of his pocket and he shot it down on the floor. I don't know what the object was in doing that, but anyhow he just took the revolver and shot it—just running a bluff, I suppose. Of course I was easily handled. I wasn't looking for trouble. I didn't go over there for trouble. A few days after that I was sitting back in the back department reading, and of course there was some wrangling there, and the first thing I got a punch right on the jaw. It was a good one, too. It blacked my eye. So I jumped up real quick and tried to defend myself, and a fellow named—let's see—Fred Hawkins and Hogan, they both come together. It looked like they was looking for trouble. So when Hogan hit me I jumped up and tried to defend myself, and Hogan wrapped his arm around my throat, back of me, and shut my wind off. In the meantime Hogan was punching the wind out of my ribs, pounding me as hard as he could pound me. I eventually broke loose and fell on the floor, and they kicked me all over the floor. Then he wasn't satisfied with that, and he made me pick up a big bundle and carry it down to the laundry. I was so weak I couldn't move. I says, "I suppose you are satisfied now." He had had a drink in the meantime. I smelled it on his breath. That is just about the limit of my treatment.

The CHAIRMAN. When did this happen?

Mr. DADDYSMAN. I don't know the exact day at all.

The CHAIRMAN. But was it just after you had gotten in Gray Ash ward?

Mr. DADDYSMAN. It was just about a week after I got in there.

The CHAIRMAN. How long afterwards did you leave the hospital?

Mr. DADDYSMAN. I left there the last of July. I was in bed for three days after they gave me that thumping. I went to bed. Right over my kidneys here I thought I was ruined. So he come around and he says, "Now, I am awful sorry this occurred." He says, "I may put in a good word for you to the doctor so you can get out of here." I says, "That is pretty hard to swallow." But I says to myself—well, I says, "I will just keep my face shut until I get away from there." Of course I don't know who was the instigator of the trouble or anything else. So after that they treated me very nicely, but I thought it was very severe treatment for a patient. In fact, I had been all over this country from one end to the other end and I never had had treatment like that before.

Mr. HAY. What is your occupation?

Mr. DADDYSMAN. Machinist. I work in the navy-yard.

Mr. HAY. You are in the navy-yard now?

Mr. DADDYSMAN. Yes, sir.

Mr. HAY. How long have you been connected with the navy-yard?

Mr. DADDYSMAN. I have been there eight years. I went in during the Spanish-American war, in 1898.

Mr. HAY. Were you in the Spanish-American war yourself?

Mr. DADDYSMAN. No, sir; I was working in the navy-yard. I was in the service there during the war.

The CHAIRMAN. What about the food there?

Mr. DADDYSMAN. What is that?

The CHAIRMAN. How was the food?

Mr. DADDYSMAN. Sometimes very good and other times very bum. It was extreme, either way.

The CHAIRMAN. Do you mean it was bad or badly cooked?

Mr. DADDYSMAN. Some of it wasn't properly cooked, and some of it was. Of course after I took that French leave and went back there they didn't seem to want to give me anything to eat at all. They put me off at the side, and I just had to take what I could get hold of.

The CHAIRMAN. Did you ever see any of the other patients badly used there?

Mr. DADDYSMAN. Yes, sir; I seen several of them there. It is a wonder they recovered at all. They wrapped a towel around their necks, two of them, and just squeezed as hard as they could pull it. A man would drop over on the floor, and only trust to Providence to come to. That is all there was in it. The fellow did eventually come to all right. Yes; I seen a good lot of that rough treatment around there. Of course a lot of it was unnecessary. Perhaps some of it was necessary.

The CHAIRMAN. Did you often see such treatment as that?

Mr. DADDYSMAN. Yes, sir; it was a pretty nearly everyday occurrence of some kind. They would be knocked down or beat or something. That was in gray ash ward.

The CHAIRMAN. What was the character of the patients that were in gray ash ward?

Mr. DADDYSMAN. Different kinds. Some of them is very noisy and looking for trouble; some of them is very mild and harmless, but some of them I wouldn't trust very far at all, if you give them freedom.

Mr. SMYSER. Did you ever see a mild patient there maltreated?

Mr. DADDYSMAN. There is some there you don't know they are there at all.

Mr. SMYSER. You do not understand what I mean. Did you ever see a mild, harmless patient there maltreated by anybody—abused?

Mr. DADDYSMAN. Yes, sir; there is one fellow there that don't harm nobody, and they just put the towel around his neck and squeezed him just for the fun of the business.

Mr. SMYSER. What is his name?

Mr. DADDYSMAN. I don't know. That is one on me. In fact, I didn't learn many of their names there. I was looking after my own interests, to conduct myself right and to get myself out of there.

Mr. SMYSER. Who were the people who did that, who put the towel around that patient's neck?

Mr. DADDYSMAN. Those fellows connected with that ward.

Mr. SMYSER. Don't you know their names?

Mr. DADDYSMAN. I didn't see Hogan beat any of them, but there was——

Mr. SMYSER. No; you described that towel incident as having been done for the fun of the thing.

Mr. DADDYSMAN. I suppose so.

Mr. SMYSER. Can you not tell us who the persons were who did it?

Mr. DADDYSMAN. I don't know the fellow's name at all. In fact, I didn't take their names down. Of course Doctor White knows. He knows all these men he has got over there under him.

Mr. SMYSER. You say you never saw Hogan maltreat a harmless patient?

Mr. DADDYSMAN. No.

Mr. SMYSER. But Hogan was the man who attacked you?

Mr. DADDYSMAN. He was the man who attacked me; yes, sir. As far as other patients were concerned, I never seen Hogan lay his hands on any of them, only of course he put two or three of them in a bath tub. He ought to have emptied the water out. He put them all into the same water and washed them.

The CHAIRMAN. Did you ever have to take a bath in water in which somebody else had been bathing?

Mr. DADDYSMAN. No, sir; I wouldn't do it, because I poured my own water when I took a bath, and I used my own judgment on that for bathing purposes. I suppose they would have done it, though, if I hadn't said anything.

Mr. SMYSER. Had you any disposition while you were there to be violent?

Mr. DADDYSMAN. No, sir; none whatever. I just tried to be as pleasant as I possibly could and be as accommodating as I possibly could to get a good record, so I could get away from there. I know I went over there for treatment, and it was for my benefit. I was just as interested in myself as some of the doctors were. I always did try to take good care of myself, and I always will as long as I can. I thought it was very rude treatment for a place of that kind.

Mr. SMYSER. Did you think it was a proper place for you to go, in the condition in which you were?

Mr. DADDYSMAN. I didn't want to go in the first place. I declined in the first place to go. Of course I went to three or four doctors

about the place, and they didn't seem to know what was wrong. Well, I just told them all I needed was a rest. I had overworked myself. I always worked hard. He said that would be a good place for me to go, over there, to take a good rest. So I volunteered to go. I drove over in a cab.

Mr. SMYSER. Did your wife go with you?

Mr. DADDYSMAN. No, sir; my brother-in-law and my uncle and a young doctor all went together. Four of us went over in the cab.

Mr. SMYSER. Did they want you to go?

Mr. DADDYSMAN. Yes; they wanted me to go over there.

Mr. SMYSER. And the second time?

Mr. DADDYSMAN. The second time I was taken by officers and taken over there.

Mr. SMYSER. Had you had some trouble before?

Mr. DADDYSMAN. No; not to my knowledge.

Mr. SMYSER. Had somebody made complaint against you?

Mr. DADDYSMAN. I suppose so. I don't know where the complaint laid at all. Of course my brother-in-law came on one night. I was working in the yard at the time. I was feeling bad—cold feet. So I came home, and was home two or three days, and I suppose my wife thought I ought to go back over there again. So she went and told my brother-in-law, and he came down there one evening. He says, "Mervin, come on and take a walk over to the hospital." I says, "No; I won't go." That is just what I said. Well, I suppose he made up his mind I was to go, and he just went and got a couple of officers. Of course I had to follow them. I couldn't make any funny move. I never did resist an officer, so I just took my medicine and went over.

Mr. SMYSER. How old are you?

Mr. DADDYSMAN. Thirty-six years old.

Mr. SMYSER. Do you drink anything?

Mr. DADDYSMAN. Not to any excess. I have drunk a little bit.

Mr. SMYSER. What did you drink when you did?

Mr. DADDYSMAN. Sometimes whisky, beer. I never drank any amount of it.

Mr. SMYSER. Do you ever get drunk?

Mr. DADDYSMAN. No, sir; I never was drunk to my knowledge.

Mr. SMYSER. How does the whisky or beer affect you? Does it make you hilarious, so you want to dance at a reception, or indulge in a little scrap?

Mr. DADDYSMAN. Yes; I always like to get sporty when I get a few in me.

Mr. SMYSER. Sporty? How?

Mr. DADDYSMAN. High life.

Mr. SMYSER. You came away from the institution feeling that you had been benefited there, did you?

Mr. DADDYSMAN. I was benefited; yes, sir. The institution is all right. There is no discount on the institution. It is all right. Of course there is some people over there that has caused a whole lot of trouble. As for Doctor White, I think that Doctor White is innocent of a whole lot that has been going on over there.

Mr. SMYSER. You mean by that, I take it, that Doctor White did not know of these things you saw?

Mr. DADDYSMAN. That is about the whole substance; yes, sir.

Mr. SMYSER. You do not think, do you, that if Doctor White had known of them he would have tolerated it?

Mr. DADDYSMAN. I think he would have took some action if he had known something about it. Of course I was scared to a certain extent.

Mr. SMYSER. That is, you mean you did not allow yourself to make it known?

Mr. DADDYSMAN. No, sir; I didn't care to do it. I knew how those fellows were over there. There was a clique there together, and if I had said something to Doctor White and Doctor Stack, and they got it back, they would have made it that much harder for me. I thought to myself, "I will clear myself, and if there is any way of making a report down town I will make it." That is the way I worked it.

The CHAIRMAN. Who did you first tell the story of this treatment to?

Mr. DADDYSMAN. I told my father and mother. Mother came over there after I was beat and asked what was wrong with me. I told her. I said, "Mother, I have been beaten here." She wanted to go and tell the doctor then. I said "No, if you do there will be more trouble." I said, "Leave the thing rest until later on. Perhaps all of us will be benefited by it." She says, "All right." So, of course, I could bring her up to testify to my condition I was in.

Mr. SMYSER. If you had attendants there that were careful what would you say about the institution?

Mr. DADDYSMAN. There is Mr. Pixier, of Sycamore ward, just about as fine a man as you ever run across. He handles a patient very nicely.

Mr. SMYSER. So, summarized, there are some attendants over there that, in your judgment, ought not to be there?

Mr. DADDYSMAN. Yes, sir.

Mr. SMYSER. They are cruel and lose their temper?

Mr. DADDYSMAN. That is it.

Mr. SMYSER. And that results in violence to the patients?

Mr. DADDYSMAN. That is it exactly; yes, sir.

Mr. SMYSER. If that could be obviated, there would be no trouble over there at all?

Mr. DADDYSMAN. I don't think there would be any trouble at all.

The CHAIRMAN. What was the name of the attendant you say shot the pistol off in the ward?

Mr. DADDYSMAN. Bob Hogan.

The CHAIRMAN. Is Hogan at the hospital now, do you know?

Mr. DADDYSMAN. I think he is in the post-office now. I think he left the hospital. He is in the post-office.

The CHAIRMAN. Do you mean the city post-office here?

Mr. DADDYSMAN. Yes, sir; the city post-office here. This fellow Hawkins, of course he is very mild sometimes, but he is a fellow who would take advantage of you if he had a chance.

The CHAIRMAN. Who is Hawkins? A patient?

Mr. DADDYSMAN. He is one of the attendants over there. He is on that same ward, and Weedon.

The CHAIRMAN. Did you ever see him do anything to any of the patients?

Mr. DADDYSMAN. Yes; I have seen him.

The CHAIRMAN. That is Fred Hawkins?

Mr. DADDYSMAN. Yes, sir.

Mr. HAY. How long were you in Gray Ash?

Mr. DADDYSMAN. I judge I was in there about two months.

Mr. HAY. How often did the superintendent come through there while you were there?

Mr. DADDYSMAN. I seen Doctor White through there about three times. He came through there with other gentlemen, looking around.

Mr. HAY. When you were beaten in this way, did the physician on the ward see you after you had been beaten?

Mr. DADDYSMAN. No; I didn't see any physicians at all for four or five days after I was beaten.

Mr. HAY. Do you mean to say you were three days confined to your bed without seeing any physician at all?

Mr. DADDYSMAN. I didn't see no physician at all. In fact, I don't think there was any report made of it. I was in bed. I might have died there.

Mr. HAY. Does not the physician in charge of the ward come through the ward every day?

Mr. DADDYSMAN. He might have come through there, but I failed to see him; he didn't come in the department I was in. Of course, Hogan had charge, and he was smoothing the thing over, I guess, as nice as he possibly could to clear himself after he had done the act. I told him—I said: "That is what whisky done for you."

Mr. SMYSER. Was he drunk?

Mr. DADDYSMAN. He had a few in him.

Mr. SMYSER. But you and I have taken drinks. Was he drunk?

Mr. DADDYSMAN. Of course I don't know the amount he had drank, but he had enough in him, though, to be vengeance and looking like he was looking for trouble, and he took it out on me. I was just merely attending to my own business; I wasn't molesting or saying a word to nobody. I was reading the paper and he took me by surprise. That is what got next to me. If I had been violating the law for making any disturbance, of course then I couldn't say a word, but just jumping a man that was practically innocent and not saying a word, I say some action ought to be taken.

TESTIMONY OF TOWNSEND W. BELT.

TOWNSEND W. BELT, being duly sworn, was examined and testified as follows:

The ACTING CHAIRMAN (Mr. Smyser). What is your name?

Mr. BELT. Townsend W. Belt.

The ACTING CHAIRMAN. Where do you live?

Mr. BELT. Leesburg, Va.

The ACTING CHAIRMAN. Were you ever an employee out here in the hospital?

Mr. BELT. Yes, sir.

Mr. HAY. Are you an employee out there now?

Mr. BELT. No, sir.

The ACTING CHAIRMAN. When were you employed out there?

Mr. BELT. From the 11th day of December, 1905, until the 27th day of March, 1906.

The ACTING CHAIRMAN. In what capacity were you employed?

Mr. BELT. As an attendant.

The ACTING CHAIRMAN. What ward?

Mr. BELT. Hall 2, B Building.

The ACTING CHAIRMAN. How many patients did you have under your charge?

Mr. BELT. Not any under my charge. I was third man there.

The ACTING CHAIRMAN. How many attendants were there in that ward?

Mr. BELT. Three men and a lady——

The ACTING CHAIRMAN. How many patients were there in there?

Mr. BELT. Twenty-five.

The ACTING CHAIRMAN. What was the character of those patients—violent or otherwise?

Mr. BELT. No, sir; we had one or two violent, but they wasn't dangerous at all.

The ACTING CHAIRMAN. Were you there in that ward all the time you were there?

Mr. BELT. Yes, sir; the entire time.

The ACTING CHAIRMAN. Who was your foreman or superintendent?

Mr. BELT. In charge of the ward?

The ACTING CHAIRMAN. Yes.

Mr. BELT. C. W. Teats.

The ACTING CHAIRMAN. While you were there, what did you ever witness by way of maltreatment of patients?

Mr. BELT. When I first went there I hadn't been used to being in an insane ward, so I took as a matter of course what was going on. There was an old man there by the name of George Butts, who had a broken leg. Mr. Teats told me he had been fighting with one of the attendants and went to put up a scrap and fell and broke his leg. I noticed Mr. Teats lifting the bed and letting it fall to jar him and make him holler.

The CHAIRMAN. To make him what?

Mr. BELT. To make him holler. He would holler awful loud, and wouldn't stop for a long time. He seemed to have fun out of him, having him holler that way. I asked him on several occasions why he did it. He didn't say much of anything. He didn't give me any particular answer. He would lift his broken leg up and make him holler, and finally he died. He died about three weeks after I was there; and the next patient I saw Mr. Teats treat——

The ACTING CHAIRMAN. Before you leave that, who else saw this besides yourself?

Mr. BELT. Bruce Allen. I believe his name is D. M. Allen.

The ACTING CHAIRMAN. Where is he?

Mr. BELT. He is working over there now.

The ACTING CHAIRMAN. He would lift the old man out of bed?

Mr. BELT. No, sir; he lifted his leg up, I say. He was lying in bed. He never was out of bed while I was there.

The ACTING CHAIRMAN. Did he do that purposely?

Mr. BELT. Yes, sir.

The ACTING CHAIRMAN. Did you ever remonstrate with him?

Mr. BELT. Well, yes. The old man would curse and scratch if he could.

The ACTING CHAIRMAN. I am asking if you remonstrated with the fellow who did that?

Mr. BELT. Yes; I asked Mr. Teats why he did it, and he didn't give me any civil answer at all.

The ACTING CHAIRMAN. What answer did he give you?

Mr. BELT. None at all, to speak of. I don't know what he would say. He would say something with regard to the old fool didn't have any better sense than to holler, to let him holler, or something of that kind. I don't remember the exact words.

The ACTING CHAIRMAN. Did he say that?

Mr. BELT. Yes; he said it.

The ACTING CHAIRMAN. Or are you guessing at it?

Mr. BELT. No; he said it.

The ACTING CHAIRMAN. That is what we want to get at. He swore about it, did he?

Mr. BELT. No; I don't say that he swore about it; only he said if the old fool hadn't any better sense than to holler, let him holler.

The ACTING CHAIRMAN. Did he inflict pain on the old man?

Mr. BELT. Well, he hollered. Of course I don't know how much pain he inflicted. The old man hollered when he would lift up his leg.

The CHAIRMAN. Would he holler at times when the leg would not be lifted?

Mr. BELT. If he would lift him up in bed. Any time you moved that leg in any way, shape, or form he would holler; yes.

The ACTING CHAIRMAN. What else did you see there with any other patient?

Mr. BELT. Percy Echols, from Carlisle, Pa., he was there, and had been taking liquid diet for six months—he taken liquid diet two months while I was there—and I have seen Mr. Teates strike him and knock him out of bed and knock him unconscious when he hit the floor. On one occasion he knocked him out of bed, and he struck the floor so hard it knocked him unconscious. He put him back in bed, and I said, "I believe you have killed that man." He says, "Oh, no; he will come to." And he slapped him in the face. Then he did come to.

The ACTING CHAIRMAN. Why did he knock him to the floor?

Mr. BELT. Because he cursed him, called him bad names, and tried to scratch him; but he was very emaciated. He looked like a skeleton. He hadn't had anything but liquid food for four months. Of course he couldn't have hurt him. He died. He died about a week after that severe knock. I wouldn't be positive about the time, but I don't think he lived longer than a week. The doctors all saw his black eye.

The ACTING CHAIRMAN. What doctors?

Mr. BELT. Doctor Stack and Doctor Glasscock. I don't think Doctor White saw it. No; Doctor White was not in the ward while I was there.

The ACTING CHAIRMAN. Did you report to them how that happened?

Mr. BELT. No, sir.

The ACTING CHAIRMAN. Why did you not?

Mr. BELT. I would have been fired right away.

The ACTING CHAIRMAN. Would you not rather be fired than see that go on?

Mr. BELT. Well, I did get fired on account of reporting. I reported to Doctor White. I reported that very instance to Doctor White and I was fired in ten minutes.

The ACTING CHAIRMAN. When did you report that matter to Doctor White?

Mr. BELT. Doctor White called me up on a charge and I told him about this.

The ACTING CHAIRMAN. A charge against you?

Mr. BELT. Yes, sir; a charge against me.

The ACTING CHAIRMAN. What was that?

Mr. BELT. Asleep on duty, I believe he had it. I was asleep fifteen minutes after 6 o'clock in the morning; lying in the parlor.

The ACTING CHAIRMAN. Was that the first time you told him what you had witnessed in that ward?

Mr. BELT. Yes, sir.

The ACTING CHAIRMAN. Why did you not go and tell him before that? Were you afraid of being fired?

Mr. BELT. I was only there three months. Yes; I understood very well I would get fired when I told him, and I did get fired.

The ACTING CHAIRMAN. Were you not fired for something else?

Mr. BELT. They claimed it was something else. Really, what I was fired for was because I went to see the committee. I reported all I saw to the committee.

The ACTING CHAIRMAN. What committee?

Mr. BELT. The Medico-Legal Society; Doctor Emmons. They heard of my reporting it, and my brother went up there and they had him up and made him make an affidavit, too.

The ACTING CHAIRMAN. What else did you see there while you were there by way of mistreating patients?

Mr. BELT. I was only in this one ward. I was either asleep there or on duty. You don't have time to see anything out of your ward. I have seen Mr. Teats abuse other patients that would disobey him at all in small matters. I have seen him strike Mr. Allenworth.

The ACTING CHAIRMAN. With his fist?

Mr. BELT. Yes, sir; with his fist.

The ACTING CHAIRMAN. Where?

Mr. BELT. He would strike him in his face or any place he could hit him.

The ACTING CHAIRMAN. Hard?

Mr. BELT. Hard enough to black his eyes and skin his face.

The ACTING CHAIRMAN. Did that thing occur?

Mr. BELT. Yes, sir; it occurred.

The ACTING CHAIRMAN. So that you saw the blow?

Mr. BELT. The doctors saw it, too. The doctors didn't see Teats hit him. The doctors saw the black eye and the skinned face. It was always some other patient that did it. They never asked me or Mr. Allenworth. I suppose they would always ask the man in charge, and he would tell how it happened.

The ACTING CHAIRMAN. Did you hear Teats tell how it had happened?

Mr. BELT. I heard Teats tell Mrs. McLaughlin. I never heard

Teats tell the doctors. Mrs. McLaughlin told the doctors—the lady nurse of our ward.

The ACTING CHAIRMAN. But you never reported it yourself?

Mr. BELT. No, sir; I hadn't any right to report.

The ACTING CHAIRMAN. Was he drunk?

Mr. BELT. No; I don't think he ever drank.

The ACTING CHAIRMAN. Did it ever occur to you that this man Teats, in inflicting those blows on patients there, did it out of a pure spirit of devilment?

Mr. BELT. He had gotten used to it. He didn't mind it. He had been there nine years, and it seemed it just came handy to him.

The ACTING CHAIRMAN. He is not a good fellow to have there.

Mr. BELT. Well, that is not for me to say.

The ACTING CHAIRMAN. Yes; I want to know from what you saw?

Mr. BELT. I wouldn't like to have him have charge of anybody I had anything to do with; no, sir.

The ACTING CHAIRMAN. Is there anything else you saw that we ought to know here?

Mr. BELT. I have also seen this man help himself to Government property and take it home with him. He has a family down in Anacostia. I don't know that he ever buys any soap or tobacco, or anything of that kind, but I have seen stuff in his overcoat pocket when he would get ready to go home. He would help himself to it. He had a locker in the little clothes room that they keep there. He keeps all the Government property in this locker.

Mr. HAY. What is this man's name?

Mr. BELT. Teats.

The ACTING CHAIRMAN. What is his first name?

Mr. BELT. Clark.

Mr. HAY. Is he out there now?

Mr. BELT. Yes, sir.

Mr. HAY. You say you reported his conduct to the superintendent?

Mr. BELT. Yes, sir.

The ACTING CHAIRMAN. How long ago was that?

Mr. BELT. The 27th of March I told the superintendent about it.

The ACTING CHAIRMAN. What do you know about a man named Colonel Rosecranz?

Mr. BELT. He was a patient on our ward, who died there in March some time. I don't know the exact date he died, but he had a stroke of paralysis on a Sunday. I don't know what the date was, but he was taken on a Sunday. Sunday morning, about 10 o'clock, I went down in the ward. We seldom ever get a doctor through our ward on Sunday. On the week days we have a doctor there—and sometimes two—twice a day, but on Sunday we seldom ever have a doctor through the ward at all. At about 10 o'clock I went down in the dormitory. Mr. Treats was lying there, and Colonel Rosecranz was going through funny motions, moving the covers. He couldn't keep them on, laying in bed. Mr. Teats says, "Let him alone; he has got a spell on him of some kind. I want to see what fix he will get put in." Of course I let him alone, and he wallowed over the bed a while, and dinner was ready pretty soon, and some one came to see the colonel. We had to move him out in the alcove and fix him up, because there was company, and he knocked his dinner over. We set

his dinner up for him to eat, and he knocked it over. He fell down in bed, and knocked his dinner over; and his people saw his dinner lying there. One of the patients, or Mr. Brown, I believe, cleaned up the dinner, and he never spoke after that.

The stroke of paralysis came on then. He never swallowed after that. I think he had a stroke of paralysis there, so he couldn't swallow; and the doctor came there that evening and ordered an enema. He ordered a soapsuds enema for the passage of the bowels, and Mr. Teats and I gave it; and while we were giving the enema he was so weak he almost died. We had to stop doing the operation, and when we did get a passage he passed over 2 gallons of excreta from his bowels. It just filled the bed up. I said to Mr. Teats: "When did this man have a passage last?" We began to count up, and we couldn't remember for two weeks back. The passage list is written out there on a big foolscap piece of paper, tacked to a board, and the lady is supposed to keep account of that. There are 25 patients in the ward, and of course she can't be down in the ward and keep account of the passages to save her life. There isn't any of the attendants ever asked about the passages at all. There is always a female nurse. It would be impossible, of course, for her to keep account of it. So I suppose—I don't know—she simply marks the passage up. Some of the boys mark it up. The night man marks it up to suit himself, I suppose. They are generally marked up all right on the passage list, but whether they have the passage is a different thing.

The ACTING CHAIRMAN. Was George Brown in the ward you were in?

Mr. BELT. A little while; yes, sir; about two weeks, I presume, or hardly two weeks. Yes; about two weeks—somewhere in that neighborhood.

The ACTING CHAIRMAN. You were there three months, you say?

Mr. BELT. Three months and a little over a half; yes, sir.

The ACTING CHAIRMAN. You say the superintendent did not pass through that ward while you were there?

Mr. BELT. Yes, sir. He did open the door; at least, Mr. Burch opened it for him, and he put his foot inside and looked at the window; and Mr. Burch was showing him a hole where the laundry wagon had to pull up, and wanted the hole filled up. He said he was sorry the road funds had been exhausted. That is the only time. He never come down in the ward at all. He has never been in the ward while I was there, three months and a half.

The ACTING CHAIRMAN. Did you ever see the board of visitors there?

Mr. BELT. They never come in the ward while I was there; no, sir. If they did, they were days when I was off.

Mr. HAY. How many days were you off?

Mr. BELT. I was off every other Sunday and one month day. I think that is all the time we got. I could safely say I wasn't off six days in the whole time, and I was never off but one day at a time. I have heard Mr. Teats say that Superintendent White hadn't been in the ward since it was opened. It was opened last April, 1905.

The ACTING CHAIRMAN. Is it a new building?

Mr. BELT. Yes, sir.

The ACTING CHAIRMAN. Did you drink any while you were out there?

Mr. BELT. Not to excess. I have been drinking ever since I was a kid, but I never drank to excess in my life. I never was drunk in my life.

The ACTING CHAIRMAN. What did you drink?

Mr. BELT. I drank anything I wanted to drink—beer or whisky or anything of that kind.

Mr. SMYSER. Would you sort of mix it up?

Mr. BELT. If I felt like mixing it, I would mix it; yes. I never was drunk in my life.

The ACTING CHAIRMAN. Was that one of the complaints made against you out there?

Mr. BELT. I believe Mr. Teats said I had been drinking; yes; and Mr. Godding.

The ACTING CHAIRMAN. Was that one of the complaints made against you?

Mr. BELT. Yes; I believe they said that is the reason I was asleep. We get one 12 o'clock every week, and every month we get one whole night, and that was my 12-o'clock night that I was out that night. I came in and I was talking to Doctor Hunt, the night doctor, at 12 o'clock. If I had been the least intoxicated he could have seen it, of course. I showed up at a quarter of 6 the next morning for duty, and slept from quarter of 6 to 20 minutes after 6.

The ACTING CHAIRMAN. I do not suppose you got any whisky out there, did you?

Mr. BELT. No, sir.

The ACTING CHAIRMAN. You did not take any in?

Mr. BELT. I couldn't; no, sir.

The ACTING CHAIRMAN. Did you?

Mr. BELT. I say I couldn't have anything, because I didn't take any in.

The ACTING CHAIRMAN. You came up town to get it?

Mr. BELT. Yes, sir.

The ACTING CHAIRMAN. Did you do whatever drinking you wanted to do here in town?

Mr. BELT. I did it in town; yes, sir.

TESTIMONY OF PATRICK O'CONNOR.

PATRICK O'CONNOR, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. Where do you reside, Mr. O'Connor?

Mr. O'CONNOR. Nichols avenue, Anacostia, D. C.

The CHAIRMAN. Were you ever employed in St. Elizabeth's?

Mr. O'CONNOR. Yes, sir; for a period of about thirteen years.

The CHAIRMAN. When was it?

Mr. O'CONNOR. It was last Christmas, as well as I can remember, four years ago.

The CHAIRMAN. You left the hospital last Christmas four years ago?

Mr. O'CONNOR. I didn't leave it; I had to leave it.

The CHAIRMAN. But you have not been in the hospital since?

Mr. O'CONNOR. I have been; as a daily hand, employed at a dollar and thirty-five cents a day, and here last January I left there. In other words, I was discharged last January. We will come around to that after a while.

The CHAIRMAN. So that during all the time Doctor White has been there your employment in the hospital has only been as a daily hand?

Mr. O'CONNOR. Yes, sir.

The CHAIRMAN. That was terminated last January?

Mr. O'CONNOR. Yes, sir; about the middle of January last.

The CHAIRMAN. Have you, during that time, seen many of the patients?

Mr. O'CONNOR. Yes; a good many of them.

The CHAIRMAN. Where has your work taken you?

Mr. O'CONNOR. Sir?

The CHAIRMAN. What work have you done in doing the daily work?

Mr. O'CONNOR. Clearing around the grounds.

The CHAIRMAN. Were you in any of the buildings in connection with this work?

Mr. O'CONNOR. Well, no; not while I was as a daily hand. I worked around the grounds.

The CHAIRMAN. You have never been employed in any of the buildings while Doctor White has been superintendent?

Mr. O'CONNOR. I have been employed in the grounds, in the institution.

The CHAIRMAN. I say in the buildings.

Mr. O'CONNOR. No, sir. Yes, sir; I have; some of the new buildings that was erected there some four or five years ago.

The CHAIRMAN. You have not been employed in buildings where the patients are since you have been a daily hand and while Doctor White has been superintendent?

Mr. O'CONNOR. No, sir.

The CHAIRMAN. During this last four years, did you ever see any of the attendants maltreat or mistreat any of the patients?

Mr. O'CONNOR. I did, especially on one occasion.

The CHAIRMAN. What was it? Tell us what the attendant's name was.

Mr. O'CONNOR. The patients, as well as I can remember, there were about twenty of them altogether, picking and shoveling, loading dirt into carts?

The CHAIRMAN. When was that?

Mr. O'CONNOR. Right near the Toner Building.

The CHAIRMAN. When was it?

Mr. O'CONNOR. Some time in December last. I don't know exactly.

The CHAIRMAN. December, 1905?

Mr. O'CONNOR. Yes, sir.

The CHAIRMAN. All right.

Mr. O'CONNOR. There was one of the patients there. He was simply just humming away like a crazy man would be, singing a song for himself. In the meantime he was going down with his pick all he could, and it seemed he was making too much noise for this at-

tendant. He was sitting down himself, the big attendant was, and it seemed like he was provoked by the noise this patient made, and he deliberately come over and put his hand around his neck and said, "You son of a bitch, I will make you shut up that noise." He cut his wind off, and the patient went down like that [indicating]. So he finally got up, and the patient went away, but he didn't sing no more after that, I assure you of that. That was the only case of cruelty that I did see under Doctor White.

The CHAIRMAN. What was the attendant's name?

Mr. O'CONNOR. Eugene Skinner. That is, he works the patients outside the ground, this man does.

Mr. SMYSER. He is the man who did the choking?

Mr. O'CONNOR. He is the fellow who did the choking, and in my judgment it was uncalled for.

Mr. BARCHFELD. Did you report it to the superintendent?

Mr. O'CONNOR. No, I did not; because I have seen too much of that kind of thing up there at the hospital. If you report anything like that you might as well pack up your belongings and get out of there. That is my experience at that hospital. Of course I couldn't say how it exists under the present administration of Doctor White. I couldn't say anything about that.

The CHAIRMAN. Why were you discharged?

Mr. O'CONNOR. That is what I want to get at, Mr. Chairman. I was discharged for, in fact, no reason in the world.

The CHAIRMAN. What did they say you were discharged for?

Mr. O'CONNOR. I will tell you if you will give me an opportunity to explain myself. I was there as a daily hand at \$1.35 a day. There is a piece of a railroad that runs from the Baltimore and Ohio road up to the institution that hauls coal and one thing and another up to the building. There was a man down there, a colored man, that had charge of this branch. This man was taken sick and he was sent to the hospital. Doctor White he got a foreman over there by the name of Adams Foremaugh, and this Adams he had charge of the railroad as well as the grounds, and somehow he come to find out that I knew something about railroading. I know a little bit, but not a great deal. I could learn a lot more about it. He come to me and asked me if I knew anything about railroading. I told him I worked eighteen months at it. I told him I couldn't put in a switch or a frog or a cross over, but I could keep the track in line. raise low joints, and all that. I told him nothing but the truth. He says, "That is all we want. You go right down and take charge of the road." He sent a colored man with me by the name of Eddie Brooks.

There is a place there, Mr. Chairman, where in the winter time, when we have a lot of snow and rain, it slides away down. It is a big embankment. It goes away down. So, to get the rail—the track—back in the proper place, it is necessary to get bars, with two or three men, and shove it back in line again so the locomotive can get over it. So, this morning, to get the track it was necessary to dig out the ends of the ties, you understand, to get the track back in line. So I done that. That is the experience I had when I was rail-roading eighteen months. I was doing that that morning, and this Adams Foremaugh he come down and he says to me—the very words

he says—he says: “You God damn son of a bitch, what are you doing that for?” I tried to reason with the man and show him where he was wrong. Of course I was supposed to do what he told me, but by doing it I was endangering life and property. The engine couldn’t go over the road if I were to do it as he told me. He wanted me to raise the track right up on top of the ground, you understand, without digging out the ends of the ties at all. If I did that, that is just exactly how the track would set. She couldn’t run over it at all. I explained it to Mr. Luckett, the engineer. He was running the engine there. I said, “All right, Mr. Adams, you are making a mistake.” He says, “It don’t matter a God damn to you. You do it as I tell you. I am running this thing.” So I told the engineer about it. He says, “If you do it that way I can’t get over the road.” Anyway, this foreman he went away, and I used my own judgment about it and fixed the track all right.

So it was necessary in a couple of days after that again for me to do the same thing, to dig out the ends of the ties and get it back. I was doing it a couple of mornings after that, and he come around the same way. He says: “You God damned son of a bitch, why didn’t you do as I told you? You go up to the office and get your money;” with his chest sticking out like that, and a cigar in his mouth. He owned the whole place. Of course I was supposed to do what he told me. He was my boss. I says: “All right, Captain, but I am going to inform the superintendent about you.” That is Doctor White. So I went home. I went up to the office and waited a little while to see Doctor White. He wasn’t in, so I went home. I wrote a letter explaining the whole circumstances, what I knew in regard to this Foremaugh and all about the railroad, and pointing out to Doctor White where this Adams Foremaugh was wrong. I explained the whole circumstances to him in the letter. Then I sent the letter in to Doctor White by a man by the name of Eddie Davis. I says, “Mr. Davis, you tell Doctor White after reading the contents of my letter if he wishes to see me personally I am right here.” So he read the letter and he sent out for me. Said I, “Good morning, Doctor.” “Good morning.” So he said, “Did you write this?” “Yes, sir.” He says, “Can you prove the statements you have down here? Can you prove it?” “Yes, sir.” “How can you prove it?” I says, “I have got witnesses.” “Who are they?”

I gave him the names of the witnesses, Eddie Brooks and Dan Connon. I remember it distinctly, and he made a note of it on the back of the envelope where my statement was. He says, “Well, I will have it investigated.” So I says to him, “Doctor, if you find out from the investigation that I was discharged wrongfully, will you retain me again?” He says, “I will see. I will. I will see.” The Doctor is right there and he will remember the case. Then before I left, I says to the Doctor, “Doctor, shall I seek any other employment until after the investigation?” He says, “You can suit yourself about that. That is up to you.” So I waited for a week to hear from the investigation, as he said he would have it investigated or retain me again, but he never called the witnesses that I gave him. They were never called up, and I wasn’t called up neither. The case was not investigated as far as I know, because if it was he would call the witnesses I gave him. So I never heard from it, and I wrote Doctor White a second letter, asking him for an explanation of the matter, and he never answered that; I guess simply because it was

a poor man and it didn't matter. I had to get my bread somewhere else. That was all I heard about it. On my way back from the superintendent, from the new administration building, I met the officer, Policeman Clark, in the old administration building. That is, after telling Doctor White all about the railroad and about Mr. Adams, I says, "Mr. Clark, are you aware of the fact that there is Government property stolen here and sold in these grounds?"

Then I was speaking to the policeman on duty at the hospital. He says, "No." I says, "Well, there is." He says, "Who stole Government property, and what property is it?" I said, "Shoes and clothing." "Who sold the property?" I told him it was the informant's brother that sold the property to these other two men. He sold the property to Danny Butts and Eddie Brooks—that is, clothing and shoes. So I said to the officer, I said, "Mr. Clark, I was just over with the superintendent; and it is best, I think, to leave this case go by and not look after that at all until my case is decided." He told me I would have my case investigated. "When that will be over, I think it is a good idea for you to proceed about the men that have the clothing." So he didn't wait. The next day Mr. Clark, the policeman, went around where these men were working. These men were under this fellow Adams, the foreman, you understand, Mr. Chairman.

The CHAIRMAN. Yes; I understand.

Mr. O'CONNOR. They were under him. He had control, and he was the foreman. So Clark come around the next day, and he saw these two men. He knew them personally. He saw the Government shoes and the clothing, and these two men had taken them over before the superintendent and pointed out the clothing and the shoes to Doctor White—that is, one of the witnesses told me about this himself. That is how I know about it; one of the men that had the clothing and the shoes told me this, that they were carried in front of Doctor White by the policeman, and Doctor White told him to take them over to the tailor shop, where all the Government property was issued to the patients, in what they call the tailor shop, and they were identified there as Government property. They left go these two men that had the Government property and were wearing them. They were left go, and the men that sold them were discharged, and they still have the Government property and are wearing it.

Mr. HAY. You did not tell this story until after you were discharged, did you?

Mr. O'CONNOR. No, sir.

Mr. HAY. About this stealing?

Mr. O'CONNOR. No, sir. As I told you before, if you tell anything over there while you are employed, you might as well make up your mind to pack up. Somebody else—one of the supervisors or one of the fellow-attendants—will get some job up on you to foil you. They don't want a tattle tale down there. I know that from thirteen years' experience. If you want to hold your position, you have got to keep a still tongue there. You can't afford nothing; but if I was left talk a little bit about how patients were abused in years gone by, I could give you a pretty good general idea. Whether you want it or not, I don't know.

The CHAIRMAN. Were you ever an attendant in the hospital since Doctor White has been superintendent?

Mr. O'CONNOR. No, sir.

The CHAIRMAN. You were not?

Mr. O'CONNOR. No, sir; but I have seen one case there, if you will permit me to explain it.

The CHAIRMAN. I guess that will do, Mr. O'Connor.

TESTIMONY OF MRS. ELLA L. WASHBURN.

Mrs. ELLA L. WASHBURN, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Will you give your full name?

Mrs. WASHBURN. Ella L. Washburn.

The CHAIRMAN. Where do you reside?

Mrs. WASHBURN. 730 Twelfth street NW.

The CHAIRMAN. Have you ever had any connection with the St. Elizabeth's Hospital?

Mrs. WASHBURN. I have a husband and brother both there.

The CHAIRMAN. And you have visited the hospital to see them?

Mrs. WASHBURN. I have.

The CHAIRMAN. How long have your husband and brother been there?

Mrs. WASHBURN. My brother has been there three years and my husband two years.

The CHAIRMAN. Did both of them go to the hospital at your request? Were you desirous of having them put in the hospital?

Mrs. WASHBURN. Yes.

The CHAIRMAN. How often do you visit the hospital?

Mrs. WASHBURN. Every second Sunday; sometimes every Sunday.

The CHAIRMAN. Are these gentlemen, your husband and brother, both in the same ward?

Mrs. WASHBURN. No; one is an epileptic and the other has paresis.

The CHAIRMAN. Have you ever seen any evidence of bad treatment in the hospital to either your husband or your brother or anybody else who were patients there?

Mrs. WASHBURN. Yes; my husband was bound. I went over there not long ago and his right hand was covered up under the bed clothes. I had waited a long time before I got into the ward, and after I went in, after I had been talking to him a few minutes, he raised his hand like this [indicating], and it was three times as large as it ought to have been, all swollen out of shape. I said "What is the matter?" I pulled his sleeve up, and there were ridges in his arm as though a rope had been tied as tight as it could, to the bone almost on his arm; and the attendant stood at the foot of the bed looking on. I said: "What in the world is the matter with his arm?" He never said anything.

The CHAIRMAN. He said what?

Mrs. WASHBURN. He didn't say anything at all. I said: "Could he have slept on his arm and got it in that condition?" That was before I pulled his sleeve up. I thought by sleeping on it the blood might have gone down in his hand and made it swell, but when I pulled the sleeve up I found it had been bound up. When I went out into the hall and spoke to one of the attendants, he said they had to tie them down sometimes; there were not enough attendants

there to see to them and to attend to them, and they had to restrain them in some way.

The CHAIRMAN. Did the attendant tell you how it was done?

Mrs. WASHBURN. No; he didn't say.

The CHAIRMAN. Did you speak to the doctors about this?

Mrs. WASHBURN. No.

The CHAIRMAN. Did you ever complain to Doctor White about it?

Mrs. WASHBURN. No; I don't know Doctor White. I never have seen him.

The CHAIRMAN. Did you ever ask to see him about this?

Mrs. WASHBURN. No; I have spoken to Doctor Logie and Doctor Stack.

The CHAIRMAN. Did you tell them about it?

Mrs. WASHBURN. No; I didn't tell them about it.

The CHAIRMAN. When did this happen?

Mrs. WASHBURN. It was about two months ago, I guess. I don't remember dates, but two months or more.

The CHAIRMAN. Did you see the doctors the same day you saw your husband's arm in this condition?

Mrs. WASHBURN. No, I did not; because I have only a little time to go, and I have to spend every minute with him; but I asked the attendants about it. I haven't seen either of the doctors, because I thought what use was it to complain. The more you complain the worse they will treat them, and I thought there was no use in saying anything about it because I couldn't take care of him at home, and I thought they would make it more unpleasant for him there if I complained.

The CHAIRMAN. What is the trouble with him?

Mrs. WASHBURN. He has paresis. He was an expert electrician, and I suppose he used his brain too much. I don't know. He patented some inventions, and he lost his mind.

Mr. SMYSER. What made you think, Mrs. Washburn, that if you would complain as to his treatment there they would treat him still worse?

Mrs. WASHBURN. Just simply because he was paralyzed and couldn't complain to me—couldn't tell me anything about it.

Mr. SMYSER. Yes, I know; but it seemed to you your husband had been improperly treated there, did it not?

Mrs. WASHBURN. Yes.

Mr. SMYSER. You did not complain to Doctor White?

Mrs. WASHBURN. No.

Mr. SMYSER. Or some one in authority there?

Mrs. WASHBURN. No; I had before, and it didn't have any effect whatever. I went there and found my husband in the middle of winter without a sign or stitch of underclothing on, freezing to death. I complained of that, and they said they couldn't put any underclothing on him, because he tore them all off. He didn't tear his outside clothes off. He didn't even have a pair of socks on.

Mr. SMYSER. Do you know whether it was true or not that he would tear off the underclothing?

Mrs. WASHBURN. Why no, only what the attendant said. I never saw him tear anything off.

Mr. SMYSER. Did you complain to them about that?

Mrs. WASHBURN. I did, and I complained to the doctor about it.

Mr. SMYSER. To whom?

Mrs. WASHBURN. I complained to the attendants and then the doctor. I called him up on the phone and told him about it.

Mr. SMYSER. What doctor?

Mrs. WASHBURN. Doctor Logie.

Mr. SMYSER. You told him over the phone what you had seen?

Mrs. WASHBURN. Yes; and that I found him without any underclothing on.

Mr. SMYSER. What did the doctor say?

Mrs. WASHBURN. He said he tore his clothes off; that they had trouble getting his clothes on.

Mr. SMYSER. Was that remedied?

Mrs. WASHBURN. Yes; the next time I went over he had some underclothing on.

Mr. SMYSER. Do you know whether or not until you called the doctor's attention to the fact, he knew that your husband was in that condition?

Mrs. WASHBURN. No; I don't suppose the doctor knew anything about it. It was the attendants who would know that; but if the doctor was around there, I should think once in a while he would see whether they had anything on or not. His shirt was unfastened at the neck, and he had no collar on, and it was all open and his bare skin was showing.

The CHAIRMAN. Was he in bed at this time?

Mrs. WASHBURN. Oh, no; he was walking around the ward at this time.

The CHAIRMAN. What ward was this?

Mrs. WASHBURN. This was the P building, one of the new buildings—the R building, rather. It is the last one up toward the hill. I think he is in the P building now. It is the one next to the side he is in now, the hospital ward; but he was at the other end, and that is where I found him without any underclothing on.

The CHAIRMAN. Was it cold weather at the time?

Mrs. WASHBURN. Yes; it was very cold. It was just about Christmas time. The reason I remember was because I took his Christmas present to him just a few days before Christmas. I asked him why it was, and he said they took all his clothes away from him; they wouldn't let him have anything. When I spoke to the attendant, he said: "We can't give him any underclothes because he pulls them off." That was the only explanation I had; and he had plenty, for I had taken them over to him.

The CHAIRMAN. Is there anything you know in regard to your brother, who you say is also confined there?

Mrs. WASHBURN. Charlie, of course, is able to look after himself in a way. He is paroled, but one time I went over there and I told Doctor Stack I was not able to provide his clothing, and he said they would do it. So Charley said he would ask the attendant. They are to complain to the attendants when they need clothing. Charley asked the attendant for a pair of shoes. His feet were on the ground, and he did not get any shoes. So I hadn't been over for it must have been two months. I had been kept at home, and Charley's feet were almost on the ground—just the soles sticking to the top. I said, "Why, Charley"—he looked dreadful—"What does this mean?"

Haven't you any clothes or anything to wear?" He said, "No; I have asked the attendants over and over again, and they won't give me any clothes."

I was very angry then. I didn't know who to go to, and I went right to Doctor Stack, because he was the only one I knew there, and told him about it. The next time I went over Charley had a new suit on and a pair of new shoes. I said, "How nice you look. You are all fixed up." He said, "Yes; but what did it cost me? They have taken my parole away from me and locked me up. I can't get out anywhere. I have been shut up in the building." He stated that one of the attendants—he gave me the name, but I have forgotten it now—came to him right at the table before all the patients and shook his fist under his nose and said he would get even with him about reporting to Doctor Stack about needing clothes.

The CHAIRMAN. Do you know what that attendant's name was?

Mrs. WASHBURN. No; but I can find out. Charley can tell me.

The CHAIRMAN. Will you find out and give us that name?

Mrs. WASHBURN. Yes, sir.

The CHAIRMAN. What is your brother's name?

Mrs. WASHBURN. Charles Allsworth.

The CHAIRMAN. Have you seen any of the other patients tied in bed, or anything of that kind?

Mrs. WASHBURN. Yes; there is a very old gentleman next to my husband that they say is paralyzed, and not long ago when I was over there he was lying perfectly straight in the bed and his feet were tied down in the sheets, right across the cover, tied underneath, and he was propped up with a pillow under his head and his face was turned up like this [indicating], and the clothes were strapped across this way down underneath the bed. They tie them underneath the sides of the bed. They make ropes of the sheets and tie them so they can't move.

The CHAIRMAN. Do you know what was the matter with this man?

Mrs. WASHBURN. They say he is paralyzed. He is a very old man. He has been there a long time. Then, on the other side of my husband, they tied them down there, and I saw two of them get out of bed one Sunday while I was there. They picked at the clothes until they got them unfastened and got out of bed. They wanted to go to the toilet. There wasn't an attendant around anywhere. They got out of their beds and started to the toilet, and I had to send my little boy to get an attendant to help them. The attendant led them out there, but they took the bedclothes and spread them up just in the condition they were in, and they were in a very filthy condition. When those men came back they were put to bed there again and fastened down.

The CHAIRMAN. When was that?

Mrs. WASHBURN. This was two or three months ago; not any longer than that; probably two months ago.

Mr. SMYER. Do you know whether these patients are strapped in bed to keep them from falling out?

Mrs. WASHBURN. No; I have never seen any straps. All I have seen are the sheets tied underneath; but my husband told me they had handcuffs.

Mr. SMYER. Just a moment, madam. These patients you saw tied or fastened with sheets: Do you know whether that was to prevent them from falling out of bed, or not?

Mrs. WASHBURN. I think it was to prevent them from getting up—getting out of the bed. I have seen them come in several times and tie them down, and then they would get the clothes loose. They would tie their feet underneath so they couldn't move their feet at all, and when the attendant would go out they would get the clothes loose, and then they would come back and tie them down in again—fasten them down so that they couldn't move their feet. There are so few attendants there. There is nobody to do anything for them. They fasten them down and leave them so that they can't get up. I have been there for an hour at a time and I never see an attendant. They take me to the door of the ward and leave me, and I don't know the name of a single attendant in the place, although I have been going there for two years. I see them very seldom. They just let me in and that is all I see of them. When I am there, there is nobody to attend to them. They say they have so much to attend to outside they haven't the time to be in the ward.

The CHAIRMAN. How many people are there in this ward where your husband is?

Mrs. WASHBURN. I never counted the cots, but every one is full. I should think there are about 15 on a side. It seems as if there must be as many as that.

TESTIMONY OF MRS. ALICE E. CARRAHER.

Mrs. ALICE E. CARRAHER, being duly sworn, was examined and testified as follows:

The CHAIRMAN. What is your full name, Mrs. Carraher?

Mrs. CARRAHER. Alice E. Carraher.

The CHAIRMAN. Do you reside in Washington?

Mrs. CARRAHER. Yes, sir.

The CHAIRMAN. Have you any friend in the St. Elizabeth's Asylum as a patient?

Mrs. CARRAHER. My husband is there.

The CHAIRMAN. How long has he been there?

Mrs. CARRAHER. Three years next September.

The CHAIRMAN. Do you visit the hospital frequently?

Mrs. CARRAHER. I do, at least three times a week, unless I am sick and can not go.

The CHAIRMAN. What ward is he in?

Mrs. CARRAHER. He is now in the R building, ward 3, I think they call it. I don't know.

The CHAIRMAN. Why was he confined in the hospital? What is the matter with him?

Mrs. CARRAHER. Paresis.

The CHAIRMAN. Have you any complaints to make of his treatment?

Mrs. CARRAHER. Well, I know a good bit, but I don't know whether it is necessary to tell it or not. I am almost afraid to tell.

The CHAIRMAN. We want to get at the facts, and we are very anxious to have you tell.

Mrs. CARRAHER. I am very nervous and I don't know whether I will think of one-half or not. I have made a synopsis in this book

I have here when he had black eyes, and I don't know that I could recall this without referring to the book.

The CHAIRMAN. You can refresh your memory by referring to the book. Will you tell of the first instance of anything that happened that you thought was just cause of complaint there?

Mrs. CARRAHER. He had a terrible black eye.

The CHAIRMAN. When was this?

Mrs. CARRAHER. He wasn't there two months. He was then in the Toner Building. I couldn't find out how he received the injury. No one ever seems to know; and he has had at least seven black eyes since he has been there. He had two at one time.

The CHAIRMAN. Did you ask the attendants in regard to it?

Mrs. CARRAHER. Yes; but they never know anything.

The CHAIRMAN. Did you ask any of the doctors?

Mrs. CARRAHER. Yes; but they didn't know anything. Doctor Fitch was called in. I called up Doctor Logie, and he was not there that day, and Doctor Fitch, I think his name was, came over. He took one of the attendants in the upper end of the hall and consulted him, and when he came back I asked him how he thought the Doctor had got the sprained hand and wrist, and he said: "Well, you know these things come with that disease." I said, "They do?" Well, I didn't think they did. Being a doctor's wife I thought I knew a little about myself. I said: "Bruises and sprains certainly don't come with paresis;" but that is all I got. I couldn't get anything more. They don't tell you anything. You can't find out anything.

The CHAIRMAN. Did you ever make any written complaint about this?

Mrs. CARRAHER. No, sir.

The CHAIRMAN. Did you ever try to see Doctor White and tell him of it?

Mrs. CARRAHER. No, sir; I never met Doctor White. I don't know him at all. I never have seen him in the building since I have been there.

Mr. SMYSER. Will you describe just where you saw the blackened eyes?

Mrs. CARRAHER. Yes; they were black in the sockets here. It looked as if he had been struck in this way [indicating], and even the pupil of the eye was bruised.

Mr. SMYSER. Were both of the eyes in that condition?

Mrs. CARRAHER. At one time they were.

Mr. SMYSER. Did it look to you as if that was the result of a blow?

Mrs. CARRAHER. Well, I thought so.

Mr. SMYSER. Were both eyes blackened apparently alike?

Mrs. CARRAHER. No; not exactly. One was near the cheek. I asked Mr. Swain, one of the attendants, about it, and he said didn't know that he had a black eye. He said: "You had better consult Mr. Blinn." He was the head attendant. I went to Mr. Blinn and he laughed, like it was a huge joke. He said he didn't know he had a black eye. I told him it was strange he didn't know the doctor was injured; but he laughed it off. He didn't know anything about it at all.

The CHAIRMAN. Does your husband perform any work there, as some of the patients do?

Mrs. CARRAHER. No, sir; he is in bed.

The CHAIRMAN. He is confined to his bed all the time?

Mrs. CARRAHER. Yes, sir.

Mr. HAY. Has he been confined to his bed ever since he has been there?

Mrs. CARRAHER. Mostly; yes, sir.

Mr. SMYSER. Is he helpless?

Mrs. CARRAHER. Well, he can get out of bed; but he walks very badly. He has paralysis of the limbs, and he staggers as he walks.

Mr. SMYSER. Does he ever fall down, that you know of?

Mrs. CARRAHER. I saw two different nurses push him when they forgot I was there. They brought him up and pushed him over back; when they got near the door to go into the hall, they pushed him forward and he caught against the jamb of the door. I said: "Oh, Mr. Aman, if he had fallen then and got a black eye you would not have known how he got it, would you? But I happened to see you push the Doctor." Another day Mr. Lang pushed him, and I called his attention to it.

Mr. SMYSER. Do you know of his falling by reason of his condition?

Mrs. CARRAHER. I never saw him fall.

Mr. SMYSER. Did you ever see any other signs of abuse about him?

Mrs. CARRAHER. I have seen bruises on his limbs, arms, and shoulder.

Mr. SMYSER. Did you ascertain how they came there?

Mrs. CARRAHER. No; I could not find out. There is one thing—I don't think that we have nurses enough. That is the trouble. We have not nurses enough. Sometimes there are at least 35 men in our ward, and we have not but one nurse. The nurses have to wash the windows and wax the floors and do all the drudgery, and they don't have time to attend to the patients as they should do, and naturally they become very tired and they will get cross and abuse the patients. That is what I have seen when I have been there.

The CHAIRMAN. Have you seen other patients abused there?

Mrs. CARRAHER. Yes; I have seen the nurses push them back onto the beds and throw them back and strike the back of their heads against the head of the bedstead. I called the attention of one or two of them to it, and they said: "Oh, well, they don't know; they are crazy; they don't know anything about it."

Mr. SMYSER. When did it first occur to you that there were not sufficient attendants over there?

Mrs. CARRAHER. Ever since I have been going there.

Mr. SMYSER. Have you ever called that to the attention of anybody?

Mrs. CARRAHER. Yes; when I moved I told Doctor Logie that I didn't think we had attendants enough for the helpless ward that we had, and he put another man on. We are supposed to have two nurses and two attendants, but half the time we don't have them. Just after supper there are two of them that go off.

Mr. SMYSER. Did you ever call it to the attention of the board of visitors?

Mrs. CARRAHER. Well, I never tried to make any trouble. I always try to keep quiet.

Mr. SMYSER. You misunderstand me. You honestly thought, and think now, that there is a lack of sufficient attendants at the hospital?

Mrs. CARRAHER. Yes.

Mr. SMYSER. It is not by way of reflection at all; but I want to know whether you ever called the attention of anybody to that condition, other than the Doctor, with a view of correcting that trouble?

Mrs. CARRAHER. No; I never did.

Mr. SMYSER. You feel that if there were more attendants there there would be less evidence of abuse to patients, than you have witnessed?

Mrs. CARRAHER. I think most likely there would be; yes. I think that if there were more attendants over there, especially in that helpless ward, it would be better. The men don't have time to attend to them properly, I don't believe.

The CHAIRMAN. Did you ever see your husband tied in bed?

Mrs. CARRAHER. Yes, sir.

The CHAIRMAN. How was that done?

Mrs. CARRAHER. With a sheet just tied across his bed. They said they did that to keep him from running around the ward. He would get up and he would get quite cold, lots of times. I have been there and the room would be cold and the transom would be open—at least once it was. He was shivering with the cold and looked blue. I went out and got one of the attendants to come in and shut the transom; but he found the catch was broken in the transom, and he said he didn't believe he could close it. I said: "It will have to be closed; it will have to be nailed up; I will not go away from here until I see that transom closed. I think that day there was something the matter with the furnace, and it was one of the coldest days we had this winter. There was not a bit of fire in the building. It was neglect for the transom to be open, because they had not noticed it until I called their attention to it.

Mr. HAY. Do you know anything about the food over there?

Mrs. CARRAHER. It is better this last month than it has been. I have seen worms in the crackers, or in the soup. I suppose they call that oyster soup. Mrs. Dewees was there, and she called my attention to it. I told her that I hadn't noticed that the Doctor had been eating any worms.

Mr. SMYSER. Who is Mrs. Dewees?

Mrs. CARRAHER. She has a husband over there who has been there as long as my husband has.

Mr. SMYSER. How is the food, generally; is it pretty good?

Mrs. CARRAHER. At one time they cut off the sugar and the butter. I think it was oleomargarine, but I am not certain. It didn't look like butter. They didn't even allow them to have it in their tea or coffee.

The CHAIRMAN. Did you see any evidence of maltreatment of other patients than your husband?

Mrs. CARRAHER. Yes; I saw one of the attendants pick up a poor old creature over there and throw him down and stamp with both knees on him. I happened to be standing at the window in the upper end of the ward, and I turned around to him and said: "How can you do that?" I said: "You know you are an attendant here, and you don't know what day you will be a patient." I said: "You know that we have an attendant upstairs now who is a patient here, and you are just as liable as he is to be a patient." He laughed at it as if it was a huge joke.

Mr. HAY. What was his name?

Mrs. CARRAHER. His name was Blinn.

Mr. SMYSER. Is he there yet, do you know?

Mrs. CARRAHER. I think Mr. James is on our ward now, and he is one of the best men over there. I never saw such a kind man to the patients. If they had more like him we would be better off.

The CHAIRMAN. Did you ever see any of the board of visitors there?

Mrs. CARRAHER. Never.

The CHAIRMAN. How often did they allow you to go to the hospital to visit your husband?

Mrs. CARRAHER. Well, they allow me to go at any time.

Mr. BARCHFELD. How often do you visit him?

Mrs. CARRAHER. If the Doctor is very ill I go every day. I usually try to go two or three times a week now.

Mr. BARCHFELD. How long has your husband been there?

Mrs. CARRAHER. He has been there three years in September.

Mr. BARCHFELD. Has he improved any?

Mrs. CARRAHER. No, sir; he is weaker than he was.

Mr. BARCHFELD. You say he has paresis?

Mrs. CARRAHER. Yes, sir.

TESTIMONY OF JAMES A. KINSEY.

JAMES A. KINSEY, being first duly sworn, was examined and testified as follows:

The CHAIRMAN. State your full name.

Mr. KINSEY. James A. Kinsey.

The CHAIRMAN. You were an inmate of the Government Hospital for the Insane, were you not?

Mr. KINSEY. Yes, sir.

The CHAIRMAN. Do you know about when you went there?

Mr. KINSEY. I think it was the 18th of March, 1904.

The CHAIRMAN. How long did you stay there?

Mr. KINSEY. Up to about the 30th of September.

The CHAIRMAN. Of the same year?

Mr. KINSEY. Yes, sir.

The CHAIRMAN. How did you come to go there; did you go there voluntarily?

Mr. KINSEY. I went there voluntarily. I would like to make a statement about that. I had heart trouble, you know, a couple of years before that. I had a kind of a touch. About three weeks previous I had a touch, and I was sent over there; but I got out again. I was taken up before the court and discharged as sane. The same effect came on me again, and I was walking up and down the street and I didn't know what to do or where to go. I tried to keep on the sidewalk, but I bumped my head up against a rod. I wanted to keep out of the street, for fear I would get run over. I went up to the station house and gave myself up. In fact, I went clean out of my head altogether, and I didn't know what I was doing. I was afraid to go home for fear I might do some trouble to my children and my wife. I thought the best thing I could do, while I had any sense at all, was to give myself up. When I went over to the hospital I was treated well enough for two or three days; but I got to

understand from Mr. Lloyd that the only way they cured patients over there was by cutting their wind off.

The CHAIRMAN. From whom did you learn that?

Mr. KINSEY. From Mr. Lloyd, the head man in our ward.

The CHAIRMAN. What was your ward?

Mr. KINSEY. Gray ash ward.

The CHAIRMAN. Was your wind ever cut off?

Mr. KINSEY. It certainly was.

The CHAIRMAN. How did they do it?

Mr. KINSEY. Why, they wring you out that way, under the arms [indicating]. They threw me on the floor and pushed me around the room and tore a fingernail off of me.

The CHAIRMAN. Who did that?

Mr. KINSEY. A fellow by the name of Thrift.

The CHAIRMAN. How often did that happen?

Mr. KINSEY. I don't know; I couldn't tell. At that time I was in a terrible condition; but every day I would come to myself, and I would find out I was pretty well punished.

The CHAIRMAN. Didn't you know about it while it was happening?

Mr. KINSEY. I couldn't know about it—in fact, I knew and I didn't know. I would raise the mischief, and I knew I was raising the mischief all the time; but they could have handled me, because I wasn't any way violent. But when they got violent with me I believe I got violent with Thrift. When Thrift came in this night, I asked him for a drink of water, and he wouldn't give me any water. I was parched for water, and when he wouldn't give me any water I waited until Thrift opened the door and he had a glass of water, and I hit him and laid him out, but not until he abused me. I don't believe a crazy person will touch anybody until they are abused.

The CHAIRMAN. But on this particular occasion you knocked Thrift down?

Mr. KINSEY. Yes, sir; but previous to that I had got it in the neck, you understand—this wringing-out business.

The CHAIRMAN. I don't understand what you mean by wringing out.

Mr. KINSEY. Just choking you, strangling you, cutting your wind off.

The CHAIRMAN. How; do they bind you around the waist?

Mr. KINSEY. No, sir; right around the neck here, until I was exhausted, and then he threw me violently on the floor and cut my eye. I have got the mark here yet. Doctor White saw the condition I was in when he came through the ward; but there was nothing done about it.

The CHAIRMAN. Did you ever complain to any of the doctors about it?

Mr. KINSEY. Why, it was sure death to complain.

The CHAIRMAN. Did you ever know anybody who did complain about bad treatment?

Mr. KINSEY. I was told that if you complained your name was Dennis.

The CHAIRMAN. Who told you so?

Mr. KINSEY. A number of the patients.

Mr. SMYSER. Do you know a man named Tennison over there?

Mr. KINSEY. Yes, sir.

Mr. SMYSER. What kind of a fellow is he?

Mr. KINSEY. Well, for a brute I think he is about as big a brute as you would want to find.

Mr. SMYSER. Did you ever know him to maltreat a patient?

Mr. KINSEY. Yes, sir; I have seen him get hold of a patient and knock him down on the floor and pound his stomach until I thought the man would be dead.

The CHAIRMAN. Were there other attendants around at the time this was going on?

Mr. KINSEY. There were other attendants in the ward—Lloyd and Moffatt and Thrift and Tennison—in fact, all of them. Lloyd twisted my arm until it was seven or eight months after I came out that I could hardly work at my trade.

The CHAIRMAN. What is your trade?

Mr. KINSEY. Tailor.

The CHAIRMAN. Were you ever in Oak ward?

Mr. KINSEY. Yes, sir.

The CHAIRMAN. In the hospital part of that ward?

Mr. KINSEY. Yes, sir.

The CHAIRMAN. What did they send you there for?

Mr. KINSEY. For a fracture of my ribs.

The CHAIRMAN. How did they fracture your ribs?

Mr. KINSEY. A fellow by the name of Isaac Oppenheimer did it. I was raising the mischief on other nights, but I never said a word that night, because I felt pretty good, and I slept out on the hall floor that night. He jumped up and came up behind me and hit me in the back of the head with his slipper and then jumped on top of me—a man weighing about 300 pounds.

The CHAIRMAN. Was he an attendant or a patient?

Mr. KINSEY. He was a patient, but he told me himself that he was told to do it, and that if he didn't do it he would get it himself.

The CHAIRMAN. The attendant told you that?

Mr. KINSEY. No; the patient. The man was pretty sensible. He was not entirely crazy.

The CHAIRMAN. You were in the habit of raising mischief there?

Mr. KINSEY. I was; but only with the mouth—talking and holler-ing around, as crazy as a June bug. That's about all.

The CHAIRMAN. What caused your trouble; drink?

Mr. KINSEY. No; not drink at all, because I never drink any only in the nighttime, and then I may take a couple of glasses of beer. I haven't touched whisky since 1885; not to drink to any excess at all.

The CHAIRMAN. How long have you been in the hospital?

Mr. KINSEY. I was in there over seven months.

The CHAIRMAN. Were you well treated there?

Mr. KINSEY. You mean in Oak ward?

The CHAIRMAN. I mean in the hospital part of Oak ward.

Mr. KINSEY. Yes, sir; I was treated pretty well there. I went up there, I think, the latter part of May, and then went up to Sycamore ward in July.

The CHAIRMAN. Who were the attendants in the hospital ward?

Mr. KINSEY. Miss McLaughlin and Miss Perry and Mr. Allen and Mr. Pendleton and Joe Martin.

The CHAIRMAN. Did they treat you pretty well?

Mr. KINSEY. Everyone of them treated me fine. I couldn't get better treatment. I believe it is through myself and them that I got out of there. Kind treatment seemed to do me more good than all the cutting off of the wind.

The CHAIRMAN. What do you know about a man by the name of Dodge?

Mr. KINSEY. I know that man was pretty badly treated.

The CHAIRMAN. By whom?

Mr. KINSEY. He was forced violently against the wall one day, when some parties came over to see me. Pendleton just took him and threw him up against the wall. I went to see him after he was dead, out of the hospital, and he looked like he was just out from under a pounding machine. The man was all black and blue.

The CHAIRMAN. How did Pendleton hurt him?

Mr. KINSEY. He didn't treat him so very roughly so far as that was concerned; it was not then; it was when he was sent down to Gray Ash. It was almost sure death to go down to Gray Ash. I got paroled out in the grounds, and I seen him with his hand in a sling, and it looked like they had broke his hand again.

Mr. SMYSER. Did you ever see any violent treatment of patients in any ward other than the ward where the patients themselves were violent?

Mr. KINSEY. I have seen patients that were fighting and quarrelling with one another, and I have seen the attendants say: "Go and hit him in the head with a broom." The patient would go and do it.

Mr. SMYSER. Understand my question. Did you ever see a patient treated violently by an attendant in any ward other than where the patients themselves were violent?

Mr. KINSEY. I don't catch on to what you want to get at.

Mr. SMYSER. Sometimes the patients were rough and violent toward each other?

Mr. KINSEY. Sure.

Mr. SMYSER. I would call that a ward made up of violent patients. You saw these things happen in there?

Mr. KINSEY. The patients would hardly be violent to each other because, as a general thing, the attendants would be there very quickly to separate them. But the most violent business and the most insane people over there were the attendants, because brutality is nothing else only insanity, and they use it pretty well over there. If you are brutal you will be easy sent down into a lower ward.

Mr. HAY. How many wards have you in the asylum?

Mr. KINSEY. I was in Gray Ash, Sycamore, and Oak.

Mr. BARCHFELD. In seven months?

Mr. KINSEY. In seven months.

Mr. HAY. You were in Oak ward when you were in the hospital?

Mr. KINSEY. Yes, sir; and it was all right in there; but I didn't get anything to eat there for days. I used to wonder how a person with fractured limbs could live so long on milk punches. In fact my bowels were so closed up that I couldn't hardly live at all, and they never gave me nothing such as medicine. The medicine I seen was abuse—but not in that ward, though.

Mr. HAY. You said a moment ago that the attendants of that ward were very kind to you?

Mr. KINSEY. Sure.

Mr. HAY. I suppose they did not give you anything to eat except what the doctor prescribed.

Mr. KINSEY. They would only give it to me as the doctor prescribed it. I stole some lunches and shut the door and went into a room and ate the lunches. Then Miss McLaughlin said that I might as well go in and eat my supper, because it was my own fault if I died from being so long without food.

The CHAIRMAN. How much do you weigh?

Mr. KINSEY. I weigh about 200 now; but I weighed 215 when I went in there, I think.

The CHAIRMAN. You know of somebody who wants to testify about these things, do you not?

Mr. KINSEY. Yes, sir; there was a party that came over there to see me often.

The CHAIRMAN. What is his name?

Mr. KINSEY. Wilson Ross.

Mr. BARCHFELD. Where does he live?

Mr. KINSEY. He lives at Seventh and K, on the southeast corner.

Mr. BARCHFELD. At Seventh and K southeast?

Mr. KINSEY. No, southwest; on the southeast corner.

(At this point Mr. Smyser took the chair.)

TESTIMONY OF ALBERT E. BLACKISTONE.

ALBERT E. BLACKISTONE, being first duly sworn, was examined and testified as follows:

The ACTING CHAIRMAN. What is your full name?

Mr. BLACKISTONE. A. E. Blackistone.

The ACTING CHAIRMAN. Where do you live?

Mr. BLACKISTONE. In Anacostia.

The ACTING CHAIRMAN. Were you ever employed at the hospital?

Mr. BLACKISTONE. Yes, sir.

The ACTING CHAIRMAN. In what capacity?

Mr. BLACKISTONE. As attendant.

The ACTING CHAIRMAN. When did you go there?

Mr. BLACKISTONE. In 1881.

The ACTING CHAIRMAN. When did you leave there?

Mr. BLACKISTONE. In 1902. I served my notice of fifteen days, and left about July, I think, to the best of my knowledge. I came back in the same year about the 20th of November. The second time I left I left on the 3d day of April—this April.

The ACTING CHAIRMAN. You were an attendant in what building?

Mr. BLACKISTONE. I was in West Lodge. My last service there was to be in charge of the West Lodge dining room, where the patients eat; but I was relieved there every night.

The ACTING CHAIRMAN. What were your duties?

Mr. BLACKISTONE. My duty was supposed to be in the dining room, when I first went there, and I was not to be called on to help only in cases of emergency.

The ACTING CHAIRMAN. You were there away back in 1880 and 1881?

Mr. BLACKISTONE. Yes, sir.

The ACTING CHAIRMAN. We do not care to go back beyond the time when Doctor White was in charge.

Mr. BLACKISTONE. It was under Doctor White when I was in charge of this dining room in the West Lodge.

The ACTING CHAIRMAN. What class of people did you wait on?

Mr. BLACKISTONE. We had a colored class there.

The ACTING CHAIRMAN. How many people did you have to wait on?

Mr. BLACKISTONE. We had 83. It would run 83 and sometimes over and sometimes go back a little. Maybe a man would be transferred.

The ACTING CHAIRMAN. How many men did you have to help you?

Mr. BLACKISTONE. When I first went down there I had another attendant with me, and about five or six patients. Some of them were right good, and some were not very much good at anything. After I was there for some time this man was taken away and I had to be by myself pretty much all the time. Now and then I got help; but very seldom. I had to wait on these men and do the best I could. Of course I don't think one man could do it.

Mr. HAY. Were you discharged, or did you resign voluntarily?

Mr. BLACKISTONE. I resigned, sir.

The ACTING CHAIRMAN. While you were there, since Doctor White has been in charge, did you ever see anything in the way of maltreatment of patients?

Mr. BLACKISTONE. Then only thing I have seen is like this, if you call it mistreatment. Of course I waited on all these men the best I could with the help I had. I called the attention of the assistant doctor and the supervisor to the fact that I wanted more help. I told him: "Don't you think it is impossible for one man to wait on all these men?" He said: "It is pretty bad, but we are crippled up for help; we have not got the help." I explained that to Doctor Swain, and called his attention to it myself. I showed him how things were and what I had to do, and he said that it was all on account of being crippled up for want of help.

The ACTING CHAIRMAN. I mean in the way of inflicting violence. Did you ever see anything of that kind; did you ever see anybody knocked down or struck?

Mr. BLACKISTONE. No, sir; I can't say I have. When I relieved in these wards, under Doctor White, I was pretty much by myself at night. Now and then there would be a man on in a ward. Of course I would remain there until this man that was off duty came in.

The ACTING CHAIRMAN. Did you ever see anything like the striking of patients?

Mr. BLACKISTONE. No; I can't say I have.

The ACTING CHAIRMAN. Did you ever put strait-jackets on any of them?

Mr. BLACKISTONE. I have put strait-jackets on them myself.

The ACTING CHAIRMAN. What for?

Mr. BLACKISTONE. Well, they would get violent, and it would be ordered to put strait-jackets on to keep them from abusing themselves, and probably tearing up the bedding, and so on like that.

The ACTING CHAIRMAN. Did you think it was proper for you to do that?

Mr. BLACKISTONE. It was according to the way we were ordered to

do. That was to stop them, I suppose, from tearing up their bedding and clothing.

The ACTING CHAIRMAN. Would they tear up their clothing and bedding?

Mr. BLACKISTONE. Yes, sir; very often.

The ACTING CHAIRMAN. That was to prevent it?

Mr. BLACKISTONE. Yes, sir; I suppose so. I was ordered to put them on; I know that.

Mr. HAY. What about the food?

Mr. BLACKISTONE. Well, the food was not very good.

Mr. HAY. What was the matter with it?

Mr. BLACKISTONE. I think, in my judgment, it might be fixed up a little bit better and cooked a little better, and something like that.

Mr. HAY. Was the food good, but just badly cooked?

Mr. BLACKISTONE. I could not tell, after it went through that process. I know it was not very good. I don't know the conditions before it was cooked.

The ACTING CHAIRMAN. Was there enough of it?

Mr. BLACKISTONE. Sometimes we would run a little short and we would have to go over to get some more. I believe that, after hard trying and going over there several times to the kitchen for more, we would manage to get a little more for them, but it was very hard to get enough there for the men at one time. We would have to go back sometimes as high as three times to get enough for them, and probably would have to wait. Then what we had over there would get cold while we were waiting to get it.

The ACTING CHAIRMAN. Would that be due to the fact that you did not have enough attendants there to get dinner, breakfast, or supper, whichever it was, readily?

Mr. BLACKISTONE. Why, certainly; if we had had more help we could have done better.

The ACTING CHAIRMAN. And if you had had more help you could have gotten the food provided in better shape?

Mr. BLACKISTONE. We could, of course, without a doubt.

Mr. HAY. Was the superintendent of the asylum there; did he ever go through that place while you were employed?

Mr. BLACKISTONE. I remember seeing Doctor White there twice, I think, to my knowledge. Of course I have seen him around the grounds.

Mr. HAY. I mean while the patients were eating their meals?

Mr. BLACKISTONE. No, sir; I don't remember seeing him while they were eating their meals.

Mr. HAY. Did you ever complain to him?

Mr. BLACKISTONE. No; I made my statement to the supervisor and Doctor Swain. I asked him did he think one man was able to look out and care for all these men and give them proper attention. I remember what he said. He said that it was bad, but that he was crippled up for want of help.

Mr. HAY. Why did you resign?

Mr. BLACKISTONE. When I had another man to help and I didn't have to relieve so much it was all right, but after that it was pretty hard on one man to work there. It would worry the life out of any man on earth to do it. I had another place offered to me, and I thought it was better for me.

Mr. HAY. You had a better place offered to you?

Mr. BLACKISTONE. I think so. I didn't have to work so long hours. The hours were so long in there that it was killing me up. I didn't feel good after remaining in the building so long, and I lost a good deal of rest by being on late at night.

Mr. SMYSER. You were not discharged. You left there, I suspect, for two reasons: First, because of the character of the work and the amount of work you had to do, and, secondly, because of the amount of pay you got. That is right, is it not?

Mr. BLACKISTONE. Of course I did get a small amount of pay for having charge there and being called upon to do all this work. The supervisor told me I would only have to relieve in case of emergency, but finally it got so I was called on every other night. I never missed a night, and a good many nights I used to stay as late as 11 o'clock before the relief came in. I had to start work at 6 o'clock in the morning, and when I went home at that time in the night and went to bed I wouldn't feel like getting up to go to work at 6 o'clock in the morning.

The ACTING CHAIRMAN. Do you know whether they had any difficulty in getting people there as attendants?

Mr. BLACKISTONE. That I couldn't say. I don't know.

The ACTING CHAIRMAN. It is not a desirable place to work, is it?

Mr. BLACKISTONE. The place is all right. It is desirable if they had the proper number of men to look after them. If they had the men and attendants to care for them and look after them, I don't think it would be hard to do. I always liked it under Doctor Godding and I liked it under Doctor Richardson, and I liked it under Doctor White except for these things.

The ACTING CHAIRMAN. If you had sufficient help out there, it would be all right?

Mr. BLACKISTONE. Certainly. I would like it under him, too. Of course I have only seen Doctor White once or twice, but I have nothing to say against him whatever, if he had sufficient help.

The ACTING CHAIRMAN. If you had sufficient attendants out there, do you think there would be much in the way of criticism of the management of the institution?

Mr. BLACKISTONE. I will say this much: If we had a sufficient amount of attendants, it could be gotten along with much nicer and give them better care and give them attention in feeding, etc.

The ACTING CHAIRMAN. Having been there as long as you have do you think that would obviate many of these incidents that are brought out in the way of cruelty?

Mr. BLACKISTONE. Well, if they had some one to see that they did it properly and that they did their duty toward them.

(At this point Mr. Olcott resumed the chair.)

TESTIMONY OF BERNARD ALLEN.

BERNARD ALLEN, being first duly sworn, is examined and testified as follows:

The CHAIRMAN. Your name is Bernard Allen?

Mr. ALLEN. Yes, sir.

The CHAIRMAN. Where do you live?

Mr. ALLEN. I live at Camden Springs, Md.

The CHAIRMAN. What is your business?

Mr. ALLEN. I have been farming for a couple of weeks.

The CHAIRMAN. Were you ever an attendant in St. Elizabeth's Hospital?

Mr. ALLEN. Yes, sir.

The CHAIRMAN. In any other hospital?

Mr. ALLEN. Yes, sir; I have been an attendant at the Bay View Hospital.

The CHAIRMAN. Where is that?

Mr. ALLEN. In Baltimore.

The CHAIRMAN. How long were you in St. Elizabeth's?

Mr. ALLEN. I was in St. Elizabeth's up until last October, between the 20th and 28th of October. I was discharged then.

The CHAIRMAN. Why were you discharged?

Mr. ALLEN. On account of their wanting me to take a wheelbarrow and clean up around the building, and I refused to do it.

The CHAIRMAN. What ward were you in at St. Elizabeth's?

Mr. ALLEN. I had charge of Garfield Basement, when I got discharged.

The CHAIRMAN. Were you ever in any other ward?

Mr. ALLEN. In Dawes Second.

The CHAIRMAN. Were you ever in Oak Ward?

Mr. ALLEN. Yes, sir; I was in there for a short while.

The CHAIRMAN. What was the character of the patients in Garfield Basement?

Mr. ALLEN. Old soldiers, the majority of them. In fact, all of them were old soldiers.

The CHAIRMAN. What did you think of the food in the hospital at St. Elizabeth's?

Mr. ALLEN. It is very poor, to my knowledge.

The CHAIRMAN. What is the matter with it?

Mr. ALLEN. Well, it is not properly cooked, and it is not properly handled in any way.

The CHAIRMAN. Is it clean?

Mr. ALLEN. No, sir; it is not clean. The potatoes were bad, with dirt and manure on them, and the beefsteak was only half cooked. It is impossible for you to chew it. I have known the fish to be set on the table at one time and it stank so that I had to set it off of the table. It spoiled my dinner, and I was going to get discharged for setting it off the table.

The CHAIRMAN. Was that at an attendants' meal?

Mr. ALLEN. In the attendants' dining room, at the table where I ate.

The CHAIRMAN. Did you ever see any of the patients there have strait-jackets on them?

Mr. ALLEN. Yes, sir; I have put strait-jackets on a few of them.

The CHAIRMAN. Do you think it is necessary sometimes?

Mr. ALLEN. In some cases it is.

The CHAIRMAN. Was it necessary in the cases where you helped to put them on?

Mr. ALLEN. In one case it was, and in the other cases it was because of lack of attendance.

The CHAIRMAN. You do not think they had enough attendants there?

Mr ALLEN. No, sir.

The CHAIRMAN. If a strait-jacket is put on properly does it hurt the patient?

Mr. ALLEN. If it is put on properly it don't hurt them.

The CHAIRMAN. What is the object of putting them on?

Mr. ALLEN. If you loosen them so that they won't cut their arms or be too tight around the waist it don't hurt.

The CHAIRMAN. What is the object of putting on these strait-jackets?

Mr. ALLEN. They are put on in some cases when the patient would be very nervous. Some patients had to have them put on to keep them from tearing their clothes off.

The CHAIRMAN. How long do you say you were at St. Elizabeth's?

Mr. ALLEN. A little over two years.

The CHAIRMAN. Did you ever see Doctor White during that time?

Mr. ALLEN. I seen him around the grounds; but I never seen him come through Dawes Second Ward during the whole time I was there. He came through Garfield Basement once or twice going over to Howard Hall.

The CHAIRMAN. Did you ever see the Board of Visitors there.

Mr. ALLEN. I seen two people come there in the ward one time, and they told me it was the Board of Visitors. I never seen them come there to Dawes Second or Garfield Basement during my time there.

The CHAIRMAN. Did you ever towel patients with wet towels?

Mr. ALLEN. No, sir; I never did.

The CHAIRMAN. Did you ever see it done?

Mr. ALLEN. No; I don't know as I have seen it. I may have seen a case of toweling, but I couldn't say at the present time.

The CHAIRMAN. You say you have been at Bay View Hospital?

Mr. ALLEN. Yes, sir; Bay View Hospital, in Baltimore.

The CHAIRMAN. How many people are at that institution?

Mr. ALLEN. In the ward I was in there were sixty-four patients.

The CHAIRMAN. I mean altogether.

Mr. ALLEN. It is a small institution. I suppose there are between three hundred and four hundred, and, of course, they have the poor-house connected with Bay View.

The CHAIRMAN. What is the "poor-house?"

Mr. ALLEN. It is to feed the poor people of Baltimore.

The CHAIRMAN. Is the food at St. Elizabeth's as good as that at Bay View?

Mr. ALLEN. No, sir; there is just as much difference between the food at Bay View Hospital and the food at St. Elizabeth's as there would be in going down to the Raleigh Hotel and getting the best meal you could get fixed up there.

Mr. HAY. Did you ever attend any other asylum except Bay View?

Mr. ALLEN. Yes, sir; I worked at Norristown for a short while.

Mr. HAY. How is the food there; how does it compare with the food at St. Elizabeth's?

Mr. ALLEN. The food at Norristown was fairly good; but the food at St. Elizabeth's was the worst I have ever seen in any hospital I have worked in yet.

Mr. HAY. Do you think that they had a sufficient number of attendants at St. Elizabeth's?

Mr. ALLEN. To my knowledge I don't think there was.

Mr. HAY. You do not think there were sufficient attendants?

Mr. ALLEN. No, sir; in the wards I have been in there were not attendants enough for the patients. At the time of my leaving there I had a vacation due me of fifteen days which they refused me any pay for, and which I never got. I had a vacation due me in August and I put in for it on the 15th of November. When I got discharged I asked them if they were not going to pay me for my vacation, and they said they wouldn't pay me. Therefore I was there two years, and got fifteen days' leave.

Mr. HAY. Did the Board of Visitors make any investigation over there in the spring?

Mr. ALLEN. Yes, sir; they came there and made an investigation.

Mr. HAY. Were you called upon to appear before them as a witness?

Mr. ALLEN. No, sir; I was not called upon. I happened to be out for a few days at that time, and I didn't have the pleasure of going before them.

Mr. HAY. Did you sign the petition that Mr. Pyles got up?

Mr. ALLEN. No, sir; I was out and it was sent in before I got back. I would have signed it if it had been brought to me.

Mr. PYLES. Mr. Chairman, will you allow me to explain, in one word, about the petition that was gotten up?

The CHAIRMAN. Yes.

Mr. PYLES. At the proper time I will be glad to get witnesses to prove certain of these things mentioned in this petition. They signed this and they came to me. I have one man in mind who wants to testify. The doctor remarked to him: "You signed that petition and you won't be here long."

(The committee thereupon, at 5.15 o'clock p. m., adjourned until to-morrow (Thursday) morning, May 10, 1906, at 10 o'clock, a. m.)

HOUSE OF REPRESENTATIVES,
Washington, D. C. May 10, 1906, 10 o'clock a. m.

The committee met pursuant to adjournment.

Present: Messrs. Olcott (chairman), Smyser, Barchfeld, Hay, and Wallace.

Also, Dr. William A. White, Stuart McNamara, E. A. Fenning, Richard T. Evans, Hon. Frank Clark, and others.

TESTIMONY OF MRS. FRANCES S. ROLAND.

Mrs. FRANCES S. ROLAND, being first duly sworn, was examined and testified as follows:

The CHAIRMAN. Will you give your full name?

Mrs. ROLAND. Frances S. Roland; and my son's name is William Henry Roland. He goes over there by the name of William.

The CHAIRMAN. Do you reside in Washington?

Mrs. ROLAND. Yes, sir.

The CHAIRMAN. You have a son in St. Elizabeth's Asylum, have you not?

Mrs. ROLAND. Yes, sir.

The CHAIRMAN. How long has he been there?

Mrs. ROLAND. Five years the 1st of April.

The CHAIRMAN. Do you frequently go to the asylum to see him?

Mrs. ROLAND. We visit there every week. I don't exactly go every week, but my daughters and I visit every other week.

The CHAIRMAN. You have been there a number of times?

Mrs. ROLAND. Yes, sir; quite a number.

Mr. SMYSER. How frequently do you go?

Mrs. ROLAND. Every other Sunday—that is, my husband and myself go; and my daughters go every other Sunday.

The CHAIRMAN. Did you ever see anything over there, at any time, which gives you cause of complaint against the hospital, in connection with your son?

Mrs. ROLAND. Yes; on last September and last August a year ago. Last August a year ago he was cut over the eye.

The CHAIRMAN. You mean that when you saw him you found he had a cut over his eye?

Mrs. ROLAND. Yes.

The CHAIRMAN. Did you make any inquiries about how it happened?

Mrs. ROLAND. I inquired of the Superintendent and he told me it was done by a patient.

The CHAIRMAN. Do you mean Doctor White?

Mrs. ROLAND. No, sir; the supervisor.

The CHAIRMAN. Do you know now what the name of the supervisor was?

Mrs. ROLAND. Yes, sir; but I don't care to give it. He was in Atkins Hall.

The CHAIRMAN. Tell us the name of this supervisor that you speak of, if you please.

Mrs. ROLAND. The gentleman who came and notified me that his eye was cut was Mr. Clarence Carter.

The CHAIRMAN. Was he the supervisor you speak of?

Mrs. ROLAND. He was supervisor then. He came and notified me that his eye was cut and he said it was done by a patient.

The CHAIRMAN. Do you know anything else about that; did you make any inquiry about it?

Mrs. ROLAND. No, sir.

The CHAIRMAN. Now, about the incident that occurred last September.

Mrs. ROLAND. Last September I went over there and my son had a very black eye—a terrible black eye. I inquired how it was done.

The CHAIRMAN. Of whom did you make the inquiry?

Mrs. ROLAND. Doctor Logie. He says: "Mrs. Roland, I know you are going to inquire what this is." He says: "I told the attendant to keep his clothes on." He is a patient that won't keep his clothes on. He will tear them off. Doctor Logie says: "I know you are going to inquire into this business." Then he told me that he would take it all upon himself; that he had told the attendant to put his clothes on and keep them on him; and I suppose it must have enraged him and they got into a fight. I don't know whether my son hit him first or whether he hit my son first; but he certainly did have a black eye. When I seen it it had been done about ten days.

The CHAIRMAN. Do you know who the attendant was?

Mrs. ROLAND. Mr. Neighbors was his attendant.

The CHAIRMAN. Is your son inclined to be violent at times?

Mrs. ROLAND. I couldn't tell you that to save my life, because they always told me that he is very quiet and doesn't give them any trouble at all unless he sets and tears his clothes to pieces.

The CHAIRMAN. Did they put what they call a strait-jacket on him?

Mrs. ROLAND. I have seen a strait-jacket on him.

The CHAIRMAN. Did it look as though it hurt him to have that jacket on?

Mrs. ROLAND. Well, it was tied behind his back; his hands was tied.

The CHAIRMAN. His hands were up in this way, were they not [indicating]?

Mrs. ROLAND. I don't think it was when it was tied behind him here [indicating].

The CHAIRMAN. Do you mean that his hands were tied behind him?

Mrs. ROLAND. The jacket sleeves were tied behind him.

The CHAIRMAN. Where were his hands?

Mrs. ROLAND. I don't know. I couldn't tell you that, because it was tied behind him like this [indicating].

The CHAIRMAN. You mean the sleeves were tied behind him?

Mrs. ROLAND. Yes, sir.

The CHAIRMAN. It was a jacket with long sleeves, longer than necessary, and the ends of the sleeves were tied behind him?

Mrs. ROLAND. Yes, sir.

The CHAIRMAN. They told you that was because he tore his clothes up, and it was to prevent him from doing that?

Mrs. ROLAND. Yes, sir.

The CHAIRMAN. Do you know anything about the food there in the hospital?

Mrs. ROLAND. No, sir; because he is a boy that won't tell me nothing. I have asked him and tried to get him to tell me what kind of victuals he had and how they treat him over there; but he don't answer me.

The CHAIRMAN. Those are the only two evidences of anything like improper treatment that you know of?

Mrs. ROLAND. Yes, sir; since Dr. White has been there. When he was there about a year and a half I had a little trouble with him. It was Sunday afternoon and I gave him over to the attendant and I passed along about the length of this table when I heard a holler. I turned around and the attendant had him down on the ground. Whether he threw the attendant first I don't know; whether he threw the attendant first and the attendant got over on him, I don't know. I couldn't tell you. I don't know anything about it. Only I know I went up to him and I said: "You take your knee out of his stomach; there is where he is affected." They told me that he had to be made to know his boss. That is all I know.

The CHAIRMAN. That was before Dr. White was there?

Mrs. ROLAND. Yes; considerably before Dr. White was there.

Mr. SMYSER. Did you ever see any other patients, during your visits there, that were maltreated, as you supposed?

Mrs. ROLAND. No, sir; I always had an idea that they were treated most excellent over there, until this piece came out in the paper. I always believed in institutions of that kind for afflictions of all kinds; not only that, but other hospitals.

TESTIMONY OF MRS. LOTTIE P. WRIGHT.

Mrs. LOTTIE P. WRIGHT, being first duly sworn, was examined, and testified as follows:

The CHAIRMAN. Your name is Lottie P. Wright?

Mrs. WRIGHT. Yes, sir.

The CHAIRMAN. You live in Washington?

Mrs. WRIGHT. Yes, sir.

The CHAIRMAN. Were you ever a patient in St. Elizabeth's Hospital?

Mrs. WRIGHT. Yes, sir; I was.

The CHAIRMAN. When was it?

Mrs. WRIGHT. It was a year ago last November. I was over there from the 11th of November until the 11th of December, 1905.

The CHAIRMAN. You were there just a month?

Mrs. WRIGHT. Just one month; yes, sir.

The CHAIRMAN. It was 1904, was it not?

Mrs. WRIGHT. Yes, sir; 1904.

The CHAIRMAN. Have you anything to say relative to your treatment while you were there in the hospital?

Mrs. WRIGHT. Well, sometimes I was not treated as I should have been.

The CHAIRMAN. What was done to you?

Mrs. WRIGHT. I was right hard to keep in bed. That was the only trouble, they told me. I wouldn't stay in bed, because I could walk around, and I asked them to let me go out in the hall and walk around. They told me I would have to stay in my room. They would lock me in there. I would ask them to please not lock the door. I said: "Can't I have the door open?" They said: "No; you will get out of bed." I begged them not to lock the door, because I had a horror of being by myself, as I was extremely nervous. They said: "You have got to stay in here." They would lock the door and go out and leave me for hours. I had not a bell to ring to call the attention of anyone. I was in the hall one day, and of course I was weak and I fell. They took me by the right arm and dragged me almost the length of the corridor and threw me into the bed.

The CHAIRMAN. You had a private room there?

Mrs. WRIGHT. Yes, sir; I had.

The CHAIRMAN. Did they ever tie you in bed?

Mrs. WRIGHT. They had what they called a resting sheet, and they tied that to each post of the bed. It was a little iron bedstead. They had several strings—I don't know how many—and they would tie a sheet over the bed, so that I couldn't move. I just had my hands down like that [indicating] all the time.

The CHAIRMAN. Did this resting sheet hurt you; did it give you any physical pain?

Mrs. WRIGHT. Not exactly, only I couldn't move, and it was very

uncomfortable to stay in one position all the time. I couldn't even turn my head.

The CHAIRMAN. What was the matter with you when you went to the hospital?

Mrs. WRIGHT. It was extreme nervousness. I was very nervous.

Mr. SMYSER. Were you committed there by order of the court or by order of the commissioners?

Mrs. WRIGHT. By order of court, I think. I was in such a condition that I really did not know anything when I went there. I was there two weeks, and I didn't know where I was; but the remainder of the time I did know, and I know just how they treated me from that time on. I can't tell before that. I don't know anything about it, because I was almost unconscious. I didn't know my friends that would come to see me, if they did come. I don't think they allowed anyone to see me in the first two weeks.

Mr. SMYSER. At the end of thirty days you were discharged?

Mrs. WRIGHT. Yes, sir.

Mr. SMYSER. You realize now that you are fully recovered from that misfortune?

Mrs. WRIGHT. Yes, sir; I was still nervous to a certain degree.

Mr. SMYSER. Your memory came back to you, and you knew your friends and everything else about you?

Mrs. WRIGHT. Yes, indeed I did; perfectly.

Mr. HAY. Did you complain to any of the physicians there?

Mrs. WRIGHT. I told Doctor Clark one day that the patients annoyed me, because I couldn't stand the hollering and noise of those patients. Of course they couldn't help it; but they annoyed me, and I asked Doctor Clark one day to keep a certain young lady out of my room. He said: "You go back to your room and stay there." Of course I went back and stayed there. I didn't complain to him any more.

Mr. SMYSER. After your return to consciousness, so that your memory came back to you, and you could observe and retain in your memory what was going on, did you see any maltreatment of other patients?

Mrs. WRIGHT. Yes, sir; I did.

Mr. SMYSER. What was it?

Mrs. WRIGHT. There was one little girl, and I used to see them slap her right hard—slap her hard enough to make her cry.

Mr. SMYSER. Who was the attendant that did that?

Mrs. WRIGHT. The name of the young lady nurse was Marian Bond.

Mr. SMYSER. What was the occasion of that?

Mrs. WRIGHT. Well, sometimes she wouldn't sit quite still enough for her to comb her hair. That is all I ever saw her do. She never tried to lift her or to do anything to her that I could see, only she wouldn't sit quite still enough.

Mr. SMYSER. Did she slap her hard or violently?

Mrs. WRIGHT. Yes, sir; just as hard as she could slap her.

Mr. SMYSER. Where would she slap her?

Mrs. WRIGHT. She would slap her in her face or on her back or anywhere.

The CHAIRMAN. Was this the same girl that came in and annoyed you?

Mrs. WRIGHT. No, sir; that was not the same girl. This little girl was very quiet. She would come into my room, but she didn't annoy me because she was quiet.

Mr. HAY. What was her name?

Mrs. WRIGHT. Her name was Cora Webb.

TESTIMONY OF AUGUST H. HOLMBURG.

AUGUST H. HOLMBURG, being first duly sworn, was examined and testified as follows:

The CHAIRMAN. Do you live in Washington now?

Mr. HOLMBURG. Yes, sir.

The CHAIRMAN. Whereabouts?

Mr. HOLMBURG. At the Soldiers' Home, sir.

The CHAIRMAN. You were in St. Elizabeth's Hospital, were you not?

Mr. HOLMBURG. Yes, sir.

The CHAIRMAN. How long were you there?

Mr. HOLMBURG. Nearly twelve months—from the 7th of February, 1905, to the 28th of January, 1906.

The CHAIRMAN. What wards were you in—do you know?

Mr. HOLMBURG. I was committed on the 7th of February to Oak Ward, from Oak Ward I went to Gray Ash, from Gray Ash I went to Beech Ward, from Beech I went to Gray Ash, from Gray Ash I went to Oak, from Oak I went to B. B. Ward, from B. B. Ward I went to Beech Ward, from Beech Ward I went to Atkins Hall, from Atkins Hall I went to Home No. 2, and from Home No. 2 I went back to Atkins Hall. Then I was returned to the Soldiers' Home.

The CHAIRMAN. Were you ever employed as a patient to assist in the work?

Mr. HOLMBURG. I was working, but I was not employed—that is, if you mean that I was employed for any pay.

The CHAIRMAN. No; I do not mean that; but did you do some work in the asylum?

Mr. HOLMBURG. I did.

The CHAIRMAN. How were you employed?

Mr. HOLMBURG. In the morning I went down and helped the janitress in the Administration Building. After I got through with helping her I went and helped the waitress to clean up the dishes in the pantry in the doctors' dining room. I helped her three times a day—for breakfast, lunch, and supper. Then I done some odd errands and running around for the matron in the place.

The CHAIRMAN. Were you ever struck in the asylum yourself?

Mr. HOLMBURG. Yes; I am sorry to say I was, several times.

The CHAIRMAN. What was the occasion of that?

Mr. HOLMBURG. The first occasion was because I didn't mind my own business. I took the part of a poor, small, little patient that was sitting down and that was abused by one of the attendants in Gray Ash. I asked the attendant why he struck that poor little man and he said: "If you don't mind your own business, why you will get it;" and I got it. I reported the fact to Doctor Glasscock. Doctor Glasscock took no notice of it. I was simply jeered at and sneered at by the attendants, who said: "Now, what did you get for telling?"

The CHAIRMAN. What was the name of the attendant?

Mr. HOLMBURG. I couldn't tell you his name. He was a big stout man, in Gray Ash at that time.

The CHAIRMAN. Was there any other occasion when you were struck?

Mr. HOLMBURG. Yes; while I was down in B. B. Building I was kept in bed. There was an attendant by the name of Brown. I don't know whether he was afterwards dismissed or whether he left of his own accord. I couldn't say; but he came and struck me while in bed.

The CHAIRMAN. What for?

Mr. HOLMBURG. Oh, I suppose he was insane.

The CHAIRMAN. The attendant, you mean?

Mr. HOLMBURG. Yes; I can't account for it in any other way.

The CHAIRMAN. Had you done or said anything to him?

Mr. HOLMBURG. I was talking, and he said: "Shut up your talking." I suppose I didn't obey his command right away and he came and slapped me in the face. I asked him, Christian like, if he wouldn't be kind enough to slap the other face, and he accommodated me.

The CHAIRMAN. Did you ever see any of the other patients hit, besides yourself?

Mr. HOLMBURG. Why, it was a common occurrence, three times a day—breakfast, dinner, and supper—and between meals, too.

The CHAIRMAN. By what attendant?

Mr. HOLMBURG. There were three of them, and sometimes four, and they were all just as bad. It was the same way down in B. P. Building, where there was brutality to the old men and myself.

The CHAIRMAN. Were there any attendants there that were good men and merciful men?

Mr. HOLMBURG. Yes; I would come across some of them; I must say that. There were some of them in Atkins Hall, and in Home 2 I came across two men who, while I can't call them Christians, I can call them humanitarians. There were some down in B. B. Building.

The CHAIRMAN. Is that memorandum you are reading from one made at the time of these occurrences?

Mr. HOLMBURG. I could see the finger of God in this investigation when I was over there on the 7th of February. I knew that this investigation we are having this morning would come to pass, because things were so bad over there that somebody would take hold of them, and hence I made off a memorandum while I was there of this data, so as to recollect it when this investigation did come off.

The CHAIRMAN. Can you give us the names of those attendants?

Mr. HOLMBURG. I did give you the name of one attendant. Bowen was his name. That was in B. B. Building. That was in the lower ward of B. B. Building just after B. B. Building had been opened up.

The CHAIRMAN. Do you know anything about any harsh treatment of anybody else there?

Mr. HOLMBURG. Yes; there was a man by the name of Fraizer, a patient over in Gray Ash. He was sitting on my left side in the dining room in Gray Ash, and I had a young boy about twenty-one or twenty years old on the other side. Both of them were constantly abused at meal times by these attendants.

The CHAIRMAN. Do you know the names of those attendants?

Mr. HOLMBURG. One of them was Hogan. I think his name was Hogan, but I won't say that positively. I didn't take the attendant's

name at the time. Another one has since left and went into the fire department in the city, I believe.

The CHAIRMAN. Did you ever see the board of visitors there?

Mr. HOLMBURG. I never did. This was my second trip over to the asylum. I had a little bit of a preliminary from 1899 to 1900, so that it wouldn't be so hard for me to go through this hell hole the second time.

The CHAIRMAN. How did you come to go there the second time; were you committed by order of the court?

Mr. HOLMBURG. I don't know what the doctor at Soldiers' Home has got against me, and I don't know what the medical profession over at St. Elizabeth's has got against me, except it may be that I have so-called delusions. Now it remains to be seen whether these psychic manifestations of our minds are produced by delusions or whether we are normal. When these mental engineers come to take hold of a mind of a man like me that don't drink or gamble or do anything wrong and they try to treat it, they say I am insane.

The CHAIRMAN. Do you think you were improperly sent there from the Soldiers' Home?

Mr. HOLMBURG. The only way I can see it is that the doctor over there had used his influence in getting me confined; but I can tell you that I had a perfect memory. I know every incident that took place over there. The only trouble with them was that I was throwing my pearls before swine that did not appreciate it, and naturally they turned against me.

Mr. HAY. How long have you been at the Soldiers' Home?

Mr. HOLMBURG. I have been there since the 20th day of April, 1900.

Mr. HAY. You are honorably discharged from the Army?

Mr. HOLMBURG. I was discharged the 11th of March, 1899, at St. Elizabeth's Asylum.

Mr. HAY. I mean from the Army.

Mr. HOLMBURG. Well, that is right; I was in St. Elizabeth's Asylum in 1899 when I was discharged from the Army.

The CHAIRMAN. Then you went to the Soldiers' Home?

Mr. HOLMBURG. Yes; I remained at the hospital until the 20th of April, 1900, and then I was sent to the Soldiers' Home and remained there until now.

Mr. HAY. When you went to the asylum the first time, where did you come from?

Mr. HOLMBURG. I came from the Manhattan State Hospital in New York. I had been kept there for about two or three weeks, after being in Bellevue Hospital for the Insane in New York City. I was picked up there in the streets of New York.

The CHAIRMAN. Were you sent to the Manhattan Hospital at Islip or to Ward's Island?

Mr. HOLMBURG. To Ward's Island.

The CHAIRMAN. When were you there?

Mr. HOLMBURG. I was there from some time about the middle of January, 1899, until the 21st day of January, when I arrived at this asylum at St. Elizabeth's, having made application that if I was found to be insane I was not to be confined in Manhattan Hospital, but in the Government Hospital for the Insane I belonged.

The CHAIRMAN. Were you badly treated in Manhattan Hospital?

Mr. HOLMBURG. No; I was treated with great humanity in that

place; but Bellevue Hospital was another hell hole I had the misfortune to be in.

The CHAIRMAN. In what branch of the service were you?

Mr. HOLMBURG. I was first sergeant in E Company of the Thirteenth Infantry.

The CHAIRMAN. How long did you serve in the Army?

Mr. HOLMBURG. About twelve years. I enlisted first in 1886.

The CHAIRMAN. How was the food over in St. Elizabeth's?

Mr. HOLMBURG. It depends on where you are and in what building you are. In some of the buildings the food is very palatable, very good, and in other places why, it is—let us see now what it is—well, it is apple sauce for breakfast and apple sauce for supper, twice a day. That is over among the indigents, so-called.

The CHAIRMAN. Was the apple sauce good?

Mr. HOLMBURG. Well, I, as a Christian, asked God to bless it, and all kinds of food was good to me. I thrived on it and given fat; but there is not everybody that is blessed with the same faith that I have. The food we got out there and the food we get over in the Soldiers' Home is just as much different as night and day.

Mr. HAY. Do you mean to say the food at the Soldiers' Home is very much superior to the food at St. Elizabeth's?

Mr. HOLMBURG. Yes; that is just what I mean to say, sir.

Mr. SMYSER. How old are you?

Mr. HOLMBURG. I am 43.

Mr. HAY. Do you draw a pension?

Mr. HOLMBURG. Yes, sir; I had \$6 a month when I went over to St. Elizabeth's, and I was granted an increase from six to twenty-four dollars a month.

The CHAIRMAN. What was your position in the Army?

Mr. HOLMBURG. I was first sergeant of E Company in the Thirteenth Infantry when I was discharged. When I went over to the asylum I had charge of the mess hall at the Soldiers' Home, and I believe I was in there for about three years.

Mr. HAY. When you were over at the hospital was the pension which you drew taken charge of by the superintendent there; or how was that?

Mr. HOLMBURG. I had \$6 a month when I went over there, and then the 20th of February of last year there was an order issued that anybody that was not a married man and didn't have any family to depend on them five-sixths of his salary was to go to defray his expenses while he was in the Government Hospital for the Insane, and hence they took out of the \$6 I had, \$5.

I thought that as long as the Government could afford to have an official in their employ to consider that I was insane, they could afford to give me a pension, and hence I applied for a pension. I was examined in September and got an increase from \$6 to \$12, and from \$12 to \$24. The day I left the asylum there was a dispute arose about how much should be deducted out of that pension which I had received. Now, mind you, they had taken \$5 out of the \$6 all the time I was there. Then the day I left there I got \$427 coming to me, and they wanted to turn around and take out \$18.33 for full maintenance, for my board and maintenance, while I was in the asylum. Of course there was a mistake; but I am only showing you

the mistakes they have made that has to be corrected. Then they had sent me from Beach Ward, which I believe is for soldiers, and sent me over amongst the indigents. I suppose the pension, the \$5 a month, was not sufficient to pay my expenses.

Mr. HAY. Who issued the order that five-sixths of this pension should be deducted for your maintenance?

Mr. HOLMBURG. I believe it was Congress that made that order or issued the order, and then it was the Secretary of the Interior was the one that rectified it.

The CHAIRMAN. Did you ever have any conversation about your troubles with Doctor White?

Mr. HOLMBURG. Yes; a few days before I was discharged. I had conversations with Doctor White twice. One was last summer some time in June and the second time was some time in the middle of January. That was a couple of weeks before I was returned to the Soldiers' Home. I had several grievances to lay before him, and while there were other cases, I didn't lay them before him because I didn't know how long I was going to stay over there, and you know the Master says that we shall take heed of ourselves and that we shall be a little wise; hence as I had reported some maltreatment I had received from some of these attendants, I didn't think it necessary to tell him about them any more, for fear that he would make it a little bit hotter for me while I was still over there.

The CHAIRMAN. Did Doctor White receive you patiently and listen to what you had to say?

Mr. HOLMBURG. He did to this last conversation. He said, "I don't know what to do with you." I told him to just let God do what he pleased with me and to send me back to the Soldiers' Home, where I would be taken care of. He said, "The only trouble about you is that you are a little too much of an enthusiast." I told him that I believed it was necessary and that it was even required that men and women in our days should be enthusiasts.

The CHAIRMAN. What did he mean? Did he mean enthusiast in regard to religious matters?

Mr. HOLMBURG. I believe so. I told him that I believed I was watching the birds and watching eagles and big birds.

The CHAIRMAN. What did you mean by that?

Mr. HOLMBURG. Well, I thought there were some birds that were very sick at present, and I believe I expressed it that the home bird had a worm wound around its neck on the outside and that nobody could see it. You know the Master tells us that we are to be wise, and also that he is going to give us wisdom in our mouth.

TESTIMONY OF GEORGE C. WRIGHT.

GEORGE C. WRIGHT, being first duly sworn, was examined, and testified as follows:

The CHAIRMAN. What is your full name?

Mr. WRIGHT. George C. Wright.

The CHAIRMAN. Do you live in Washington?

Mr. WRIGHT. Yes, sir.

The CHAIRMAN. Have you any friends or relatives in St. Elizabeth's Hospital?

Mr. WRIGHT. I have not now. I did have some.

The CHAIRMAN. Who was it?

Mr. WRIGHT. My wife, the lady who just testified, and my mother, who died recently. She died a year ago in April.

The CHAIRMAN. Did you go over to St. Elizabeth's to see your mother and your wife?

Mr. WRIGHT. Yes, sir; a number of times.

The CHAIRMAN. Did you ever see anything like improper treatment of the patients over there?

Mr. WRIGHT. No, sir; I never was an eyewitness to it. It was hearsay, but from good authority, and I saw my mother's condition when she came from the hospital, and she was covered from head to foot with bruises.

The CHAIRMAN. What was the matter with your mother?

Mr. WRIGHT. She was insane; and she lasted about four or five days over there. They made very short work of her. I didn't recognize her when I went over to see her, she looked so bad.

The CHAIRMAN. Do you know what the cause of her death was?

Mr. WRIGHT. No; I couldn't say, except what they said it was.

The CHAIRMAN. What did they say?

Mr. WRIGHT. I couldn't tell you exactly what the cause was. I think the immediate cause they gave was heart trouble; I think anybody who stayed there long would have heart trouble.

The CHAIRMAN. Was your mother violent at all?

Mr. WRIGHT. I believe she was at times.

The CHAIRMAN. Did you have her committed to the asylum?

Mr. WRIGHT. Yes, sir.

The CHAIRMAN. Why did you do that?

Mr. WRIGHT. Because she was jeopardizing the lives of people, and it was dangerous to have her around.

The CHAIRMAN. Would she attack people?

Mr. WRIGHT. At times; yes, sir.

The CHAIRMAN. Did you ever see your mother in the hospital?

Mr. WRIGHT. Yes, sir.

The CHAIRMAN. Did you go over there with her yourself?

Mr. WRIGHT. I went over there with her and turned her over to Doctor Clark himself.

The CHAIRMAN. Do you know into what ward she was put?

Mr. WRIGHT. I could not tell you the ward. It was in the administration building. It was in one of the new buildings.

The CHAIRMAN. So she was not put in any ward at all. She was there such a short time that she was in the administration building until she died?

Mr. WRIGHT. Yes, sir.

The CHAIRMAN. Between the time you took her there and the time of her death did you see her?

Mr. WRIGHT. Yes, sir; I saw her twice.

The CHAIRMAN. How did she appear?

Mr. WRIGHT. The first day I saw her she was looking fairly good; but the next time I saw her I didn't recognize her.

The CHAIRMAN. Why not?

Mr. WRIGHT. There had been such a decided change. She looked as though she had not had anything to eat since she had been there, and she was practically dying then. She was in the last stages.

The CHAIRMAN. Do you know the names of anybody who attended her?

Mr. WRIGHT. I could not say, because I didn't see any particular one. Every time I went there I would see a different one.

The CHAIRMAN. Was your wife sent there after your mother had been?

Mr. WRIGHT. Before her. She was sent there for extreme nervousness.

Mr. HAY. What is your occupation?

Mr. WRIGHT. I am a salesman at Parker & Bridget's.

Mr. SMYSER. You felt the necessity of having your mother committed?

Mr. WRIGHT. Yes, sir.

Mr. SMYSER. How old was she?

Mr. WRIGHT. My mother was 42 to 44 years old, to the best of my knowledge.

Mr. SMYSER. After she was committed and taken over there she died within a week?

Mr. WRIGHT. Within a week.

Mr. SMYSER. A week will cover it?

Mr. WRIGHT. Yes, sir. When the undertaker went after her body it was covered with bruises. Frank Guy was the undertaker, and I think he can substantiate what I say.

Mr. SMYSER. Before she was taken to the hospital, had she been injured in any way that you know of?

Mr. WRIGHT. No, sir; simply her mind was affected.

Mr. SMYSER. In her condition of mind, which made her so dangerous that you felt you would have to have her confined somewhere, did she encounter any violence that you know of?

Mr. WRIGHT. No, sir; not that I know of. I don't think it was necessary to resort to any myself that would bring about bruises.

Mr. SMYSER. What I want to get at is this: Your mother was there but five days?

Mr. WRIGHT. Yes, sir.

Mr. SMYSER. And during those five days there was such a change in her appearance that you hardly recognized her as the same person?

Mr. WRIGHT. Yes, sir.

Mr. SMYSER. And you say she was approaching death then?

Mr. WRIGHT. Yes, sir.

Mr. SMYSER. She was admitted because she was violent. What I want to get at is whether before she was taken to the hospital she had bruised herself in any manner by coming in contact with violence with other people?

Mr. WRIGHT. No, sir; if it was, it was not noticeable. It did not make any appearance.

Mr. SMYSER. Did she live with you?

Mr. WRIGHT. No; I am married, and she lived on Seaton street. I went to see her a number of times. She had the delusion that people were trying to rob her, and I came to the conclusion that her mind was affected.

The CHAIRMAN. Who took care of her when she lived on Seaton street?

Mr. WRIGHT. My sister and brother were there with her.

Mr. SMYSER. When you were there the last time, did you see any bruises about her person?

Mr. WRIGHT. On her hand; yes, sir. And a number of scars.

Mr. SMYSER. You do not mean scars.

Mr. WRIGHT. Scars and bruises both; yes, sir.

Mr. SMYSER. Were there any scars there when she went to the hospital?

Mr. WRIGHT. If there were they were not as noticeable as they were when I last saw her. They were very apparent when I last saw her.

TESTIMONY OF ROBERT C. FOWLER.

ROBERT C. FOWLER, being first duly sworn, was examined and testified as follows:

The CHAIRMAN. Where do you reside?

Mr. FOWLER. Northeast.

The CHAIRMAN. At 1677 Gales street?

Mr. FOWLER. Yes, sir.

The CHAIRMAN. Were you ever an attendant in St. Elizabeth's Hospital?

Mr. FOWLER. Yes, sir.

The CHAIRMAN. When?

Mr. FOWLER. I don't know exactly the year now.

The CHAIRMAN. How recently?

Mr. FOWLER. It has been pretty near three years since.

The CHAIRMAN. You mean you left three years ago?

Mr. FOWLER. Yes, sir.

The CHAIRMAN. Was Doctor White there at the time?

Mr. FOWLER. No, sir; I left just before he came.

The CHAIRMAN. Do we want to go into that?

Mr. SMYSER. Let us settle this for all time. Here, gentlemen, is the witness who left before Doctor White's time. Do you want us to go back of the time of Doctor White's management?

Mr. EVANS. In my original statement I took the position that Doctor White fell heir to a condition of things over there and did not change it.

Mr. SMYSER. We do not care whether he did or did not. He would have to change it if it was wrong. I do not want to have these gentlemen feel that we are trying to curtail this investigation; but it strikes me that if the system over there is wrong it ought to be changed.

Mr. HAY. I agree with you about that; but as I understood it, the scope of this investigation was to cover the period of Doctor White's superintendency. He is not responsible for what happened there during Doctor Richardson's time. Doctor Richardson is dead, and whatever happened under him Doctor White certainly can not be held responsible for. If these gentlemen want to go into it, I have no objection. We have the time and I suppose we can do it if they want us to.

Mr. McNAMARA. Is not the question here whether it is wrong at the present time?

Mr. HAY. Mr. McNamara, for whom do you appear here?

Mr. McNAMARA. I stated that very positively at the first session.

Mr. HAY. I think that ought to be settled once for all. I want to know if it is a fact that the Attorney-General of the United States has sent an assistant district attorney here, as he says, to conserve the interests of the Government in an investigation ordered by Congress of a Government institution, which is under the control of Congress, and with which investigation the Attorney-General can not have anything on earth to do. If that is true I want it to come out. If Mr. McNamara is here representing Doctor White, I want that to come out, because, of course, Doctor White has a perfect right to have counsel here to represent him if he desires to do so; and I think he ought to have some one here to do it.

Mr. BARCHFELD. So do I.

Mr. HAY. But I do not think the assistant district attorney can properly be before this committee as a representative of Doctor White and of the Government. I think the members of this committee can conserve the interests of the Government. That is what we are here for. We are here as judges, not to prosecute anybody, but to ascertain, if we can, the facts in this case.

Mr. SMYSER. Let me call your attention to what Mr. McNamara said when we entered upon this investigation:

Mr. McNAMARA. Mr. Chairman, perhaps I should explain that I am not connected with the Attorney-General's Office. I am assistant United States attorney for the District of Columbia, and at the request of the Attorney-General I have been assigned to appear here, not especially in the interest of Doctor White or in the interest of the hospital, but simply to see that whatever interest the Government may have in this matter may be conserved. In other words, I hold no partisan brief, and the Government is equally interested with the committee in having the actual facts brought out.

Mr. HAY. Now turn to page 11, of the proceedings of the same day, and on that page you will find that Mr. Clark said:

Mr. CLARK. I think you are right about that. I think the presumption is in favor of the innocence of the accused at all times.

Mr. McNAMARA. If the committee will permit me, I would like to say that I think it would be better policy for any statement that Doctor White may have to make, if he is to be put in the position of a defendant here, at an appropriate time—that is, at the opening of the case. We are here in a matter where it may not be necessary to make any statement. It may not be necessary for Doctor White to go into proof of the case. We have not yet been apprised as to what there is before the committee.

Now, if that is not the language of an attorney representing a client, I do not know what language means. What I want to emphasize is that it is a most remarkable thing, and it has never happened before in an investigating committee. There have been numerous investigations by the House of Representatives and by the committees of the Senate; but never, I venture to assert, can be found an instance when an assistant district attorney was ordered by the Attorney-General to appear on behalf of the Government before such a committee. I have no objection to Mr. McNamara representing Doctor White; none in the world. I think it is proper, and entirely within Doctor White's rights; and I think he ought to have counsel if he feels the need of it. But I do not think that we ought to have a gentleman here from the District attorney's office or from the Attorney-General's office.

Mr. SMYSER. We are thinking along the same lines. If you will turn to page 12 you will find this:

I may then want to know by what right the Department of Justice sends a representative before an investigating committee to represent officials whose

official conduct is brought into question. I think Mr. McNamara ought to candidly state to the committee exactly what his instructions are and in what capacity he appears here. I do not think the Department of Justice is in the habit of sending counsel to protect or defend department officials who are charged with dereliction of duty; but if they have taken that new departure I want to know it. I think he should state in just what capacity he is here.

Mr. McNAMARA. I should be very glad indeed to comply with that request. The instructions I have received are very brief. They are simply, in the last analysis, that a Government agency is being investigated. The Government has a primal interest in knowing how this Government agency is conducted, and if it has been wronged it wants to know how it is wronged and by whom. If it should turn out that these charges are not properly established it wants to know that. I have been specifically instructed that I represent no official. I do not represent Doctor White any more than I represent Mr. Evans or the Medico-Legal Society. I have made this suggestion as to the course of procedure to be followed on behalf of the institution. It may be that, in the course of the investigation here, the paths of Doctor White and of the institution may cross, and in that case I might be appearing for him; but I have no specific instructions to represent Doctor White or any official or agent connected with the hospital. Of course it is absurd to say that the Department of Justice would be sending counsel to protect a mere officer of an eleemosynary institution.

Mr. HAY. It is equally absurd to say that the Department of Justice should send an attorney representing the Government in an investigation before Congress.

The CHAIRMAN. As a matter of fact, the Attorney-General has got nothing to do with this institution. It is under the charge of the Secretary of the Interior.

Mr. McNAMARA. I want to supplement the statement which has just been read by simply saying this: I made the statement here about limiting the time of this investigation, because I thought, in the interests of the Government, that the inquiry into the condition of things should be confined to the administration of Doctor White; and that we ought not to go back into an investigation of what was the administration under a dead man. As to representing Doctor White, my instructions simply are as stated in the opening. I am requested to aid in the investigation by the presentation of all relevant matters, in so far as it may be necessary for the Government to present those relevant matters. It is stated here that Doctor White is acting in an individual capacity; but he is representing the Government and is an employee of the Government and superintendent of a Government agency, and to the extent that he may be called upon to furnish evidence, I am to see that the interests of the Government are taken care of, and in that regard to present for him all relevant evidence. But as to representing him in his personal capacity, I could not do so, under authority from the Attorney-General, and you know that very well. You also know of the section of the Revised Statutes which provides—

Mr. HAY. That refers to courts, and not to Congressional hearings.

Mr. McNAMARA. We appreciate that this is not a court of law. You are investigating this matter for yourselves, and to govern your action in Congress.

Mr. HAY. The reason I made this suggestion is that counsel is here undertaking to advise the committee what they ought to do in a given matter. I am very glad to be advised by Mr. McNamara or anybody else; but I think this is a matter we ought to decide for ourselves. We would be very glad to hear Mr. McNamara; and yet we are the persons to determine whether we will examine this witness

or that witness. I have no intention in the world of reflecting upon Mr. McNamara in any way.

Mr. WALLACE. You stated that you did not represent Doctor White in your personal capacity; do you represent him in your official capacity?

Mr. McNAMARA. I referred to this official capacity, and not to my personal capacity.

Mr. HAY. I understand that Mr. McNamara says that he is here for the purpose of arranging the evidence that may be submitted for Doctor White as superintendent of St. Elizabeth's Hospital.

Mr. SMYSER. I will say, as one member of this committee, that he can not do that in a way to bind this committee to any evidence he may submit.

Mr. CLARK. I would like to ask Mr. McNamara one question.

The CHAIRMAN. Certainly.

Mr. CLARK. Mr. McNamara, you stated a moment ago that you are not here representing Doctor White in his personal capacity. Are you here representing Doctor White in his official capacity?

Mr. McNAMARA. I am not. I am here in order to aid the board of visitors, with whom Doctor White is in a certain way interested as superintendent, in representing to this committee any relevant matter which this committee may desire to hear.

Mr. CLARK. Do you not think it would have been well for you to wait until the committee sent for you?

The CHAIRMAN. I want to say that we have taken from Mr. Evans and the gentlemen who presented these charges to Congress suggestions in regard to the witnesses to be called to substantiate these charges. There is no doubt in my mind that the committee, when it comes to it, will take suggestions from Doctor White as to how these charges may be met, and that we must ask him what witnesses he desires us to call. I really have never felt that there was any particular reason for Mr. McNamara to be here, but I have never seen that there is any special harm in it.

Mr. HAY. I do not think it is a good precedent to establish.

Mr. SMYSER. Let me ask Mr. Clark a question. Here is a witness called to the stand who says that he was not employed over there when Doctor White was superintendent in charge, but that he was there under Doctor Richardson. The question before us is Whether we shall hear that class of testimony, and whether it could aid us in any way in arriving at a conclusion that would be right and proper to be embodied in our report to Congress?

Mr. CLARK. Of course I can only give you my opinion. My opinion would be that testimony of that class would not aid you at all, unless you wanted to go into evidence as to the comparative management of these different gentlemen. It seems to me that would incumber your record very much. My idea was simply to investigate the institution since Doctor White has had charge.

The CHAIRMAN. It seems to me that if there was anybody who would like to have that class of testimony gone into, as to the bad condition of affairs existing under Doctor Richardson, it would be Doctor White, in order that he might be able to show that he was attempting to make improvements.

(To the witness.) You need not wait. We will not examine you.

TESTIMONY OF WILSON TYLER.

WILSON TYLER was recalled for further examination.

MR. HAY. You testified here the other day, did you not?

MR. TYLER. Yes, sir.

MR. HAY. You testified that you did not know anything at all about Mr. Maenche being drunk.

MR. TYLER. I testified that I hadn't seen Mr. Maenche drunk, to my knowledge.

MR. HAY. Do you repeat that testimony now?

MR. TYLER. Yes, sir; to my knowledge.

MR. HAY. Did you not make a different statement to Mr. Clark; didn't you go to see him the other night?

MR. TYLER. Yes, sir.

MR. HAY. What did you tell him?

MR. TYLER. I told him that I saw Mr. Maenche in the room, and the man that put him there said that he was drunk; but I had no evidence I could swear to that he was drunk.

MR. HAY. Did you tell Mr. Clark that before you came over here to give testimony in this case this man told you that you would lose your place?

MR. TYLER. No, sir; I told Mr. Clark that Mr. Maenche said this: He asked me if I had ever been before any court, and I told him no. He said: "Well, I will tell you, for your own advantage, that the less you say the better it is."

The CHAIRMAN. Who told you this; Mr. Maenche?

MR. TYLER. Yes, sir; he says: "If they ask you certain question you answer that question yes or not, to the best of your knowledge." He says, "If you make a statement, they will cross-examine you on the statement and it will cause trouble." That is what I did. I answered yes or no to the questions that were asked, to the best of my knowledge.

MR. HAY. What else did Mr. Maenche tell you in that conversation?

MR. TYLER. Well, he told me how I come to be summoned and told me that Mr. McMurray wanted me to prove that he was drunk. I told him that Mr. McMurray was the cause of my not being able to prove it, for the simple reason that Mr. McMurray kept it hid from me at the time he was drunk. I told him that I didn't see Mr. McMurray put him in the room and that I only ran in there to get my hat, when the machine stopped, and I saw him sitting up there, but I didn't know what was wrong with him. Then, when Mr. McMurray fell out with him, McMurray says to me that he was drunk at that time and that he put him in there. But I couldn't say that he was drunk.

The CHAIRMAN. Is there anything in your former testimony here that was not true?

MR. TYLER. Not to my knowledge. I said "to the best of my knowledge," in answering.

The CHAIRMAN. Did Maenche ask you to give any testimony that was not truthful, or not to tell the truth about it?

MR. TYLER. No, sir; he didn't ask me to give any that was not true. He told me that it was to my interest to just answer the questions, and then he also said that what they were trying to prove was that

he was drunk; that Doctor White had been informed that he was a drunkard, and Doctor White had protected him in holding his position; that they were after Doctor White, and it would be to Doctor White's advantage. I told him at the same time: I can't prove that you were drunk. I have seen you in that room, and I have smelled liquor in passing; but I couldn't say that you were drunk. When I smelled the liquor you were attending to your business. When I saw you in the room you were sitting down with your eyes shut, in one instance, and in the other instance you were looking right at me, with your feet propped upon a table. I couldn't swear that he was drunk.

The CHAIRMAN. Did he say anything to you about raising your salary?

Mr. TYLER. He asked me if I had got a raise. No; he spoke of that before, but he called my attention to the fact that I had got a raise. There were several of the girls I believe that has got a raise there and he told me that Doctor White did that of his own accord to show me that Doctor White was friendly to me. He insinuated that by my protecting Mr. Maenche's interest I would work in Doctor White's favor, but I told him that I didn't feel that I could swear that he was drunk, and that I had seen him in the room and that McMurray knew that I had seen him in there because we talked about it.

The CHAIRMAN. Why did you go to see Mr. Clark?

Mr. TYLER. I didn't go to see Mr. Clark. I went to the physician's office and I found Mr. Clark there.

The CHAIRMAN. Was it by appointment?

Mr. TYLER. No, sir.

The CHAIRMAN. It was just an accidental meeting?

Mr. TYLER. My meeting with Mr. Clark; yes, sir.

The CHAIRMAN. Do you mean Mr. Clark, the Congressman?

Mr. TYLER. Yes, sir.

Mr. BARCHFELD. To what physician's office did you go?

Mr. TYLER. I went to Doctor Emmons' office.

Mr. BARCHFELD. What were you doing at Doctor Emmons' office?

Mr. TYLER. I went there to see him.

The CHAIRMAN. You had been on the witness stand?

Mr. TYLER. Yes, sir.

The CHAIRMAN. Did Doctor Emmons ask you to come to see him?

Mr. TYLER. No, sir.

The CHAIRMAN. Did you ever go to see Doctor Emmons before?

Mr. TYLER. No, sir.

The CHAIRMAN. How did you come to go to see him this time?

Mr. TYLER. I just went. It seemed as though these men wanted me, as I understood, to explain the occurrence of seeing Mr. Maenche in the room.

The CHAIRMAN. When you say "these men" whom do you mean?

Mr. TYLER. I mean Mr. McMurray. He wanted me to prove that while I didn't answer any questions except by saying yes or no, to bring in the room incident. You asked me if I ever saw him drunk and I told you "No, sir." Then I thought probably you would ask me if I ever saw him in this room, but you didn't ask me that and I had not reason to give that.

The CHAIRMAN. Who asked you to go there to see Doctor Emmons?

Mr. TYLER. No one.

The CHAIRMAN. No one asked you to go to see Doctor Emmons?

Mr. TYLER. No, sir.

The CHAIRMAN. Had you ever been to see Doctor Emmons before?

Mr. TYLER. No, sir.

The CHAIRMAN. Did you know him at all?

Mr. TYLER. I know him by sight.

Mr. SMYSER. With whom did you talk about being a witness here after you had testified?

Mr. TYLER. I talked with Mr. Maenche.

Mr. SMYSER. After you had testified?

Mr. TYLER. Yes, sir.

The CHAIRMAN. Did you speak to Mr. Maenche first about it?

Mr. TYLER. No, sir; Mr. Maenche came down and talked to me.

Mr. SMYSER. Did he ask you what you had said here?

Mr. TYLER. No, sir; he did not. He seemed to know what I had said.

Mr. SMYSER. Did you talk with Mr. McMurray after you had been here?

Mr. TYLER. No, sir; I did not. I haven't seen him since he quit.

Mr. SMYSER. Is not this the way this thing happened? Did not you as a witness state something to the committee here and was not your attention called to it by somebody after you left the room?

Mr. TYLER. No, sir.

Mr. SMYSER. Did you not then, of your own accord, go to see Doctor Emmons?

Mr. TYLER. No, sir.

Mr. SMYSER. And happened to meet Mr. Clark there?

Mr. TYLER. No, sir. I will tell you the way I came to go to see Doctor Emmons. After I had left the room I felt that I had not testified in regard to the room, in regard to seeing Mr. Maenche in the room. These men knew that I had saw Mr. Maenche in the room and they had talked with me about it. I had told them I saw him in there and naturally they knew I saw him in there.

Mr. SMYSER. When you say "these men" whom do you mean?

Mr. TYLER. I mean Mr. McMurray and Mr. Burroughs. He worked on that floor with me. They knew that I knew that Mr. Maenche was in that room. The papers stated that I didn't see anything and didn't hear anything and didn't know anything, and that made it appear very ridiculous; and I thought that in order to correct that I would state that I did see him in the room, as these men knew I did; that I didn't feel I had evidence enough to swear that he was drunk, for they were sitting down, and I had no conversation with him whatever. I couldn't testify that he was drunk at that time.

Mr. SMYSER. Then you knew that McMurray and Burroughs knew of the fact that you had seen Maenche in that room?

Mr. TYLER. Yes, sir; they knew that.

Mr. SMYSER. But you did not testify to that fact as a witness?

Mr. TYLER. Yes, sir.

Mr. SMYSER. Then when you saw in the paper that you didn't know anything, was that what induced you to go to see these people?

Mr. TYLER. That had something to do with it. I felt that these men would naturally feel that I had come here and claimed to know

nothing, when they knew I did know. They knew I did know that this man was in this room. That is, what they talked to me about. I never said I knew he was drunk. They kept asking me: "Did you see him in the room?" I said: "Yes, sir; I saw him in there." Well, they said, "He was drunk at that time." Maybe he was. It was a very funny room for him to be in. It was a room without any ventilation in it whatever, and where we hang up our hats and coats, and that's how I come to go in there and see him.

Mr. SMYSER. Did not I put this question to you: "Do you know anything about Maenche?"

Mr. TYLER. You asked me did I ever see Maenche drunk, as I understood it.

Mr. SMYSER. I will read to you now the exact question I put to you as shown by the record:

"Are you keeping back something—something you know that you don't want to tell?"

I asked you that question, did I not?

Mr. TYLER. There wasn't anything that I didn't want to tell. I wanted to tell this; but the idea was that I was answering the questions you were asking. That was the idea. I was ready to tell this when I was asked.

Mr. SMYSER. Did you purposely withhold the knowledge that you had with regard to Maenche being in that room, or did you withhold it because it was not asked you?

Mr. TYLER. I expected that you would ask me that; but you didn't ask it, and of course there was no place where I could testify to it.

Mr. SMYSER. If you had been asked the question: Did you see Maenche in that room—what would you have said?

Mr. TYLER. I would have said: Yes, sir; I saw him in there; but I couldn't say he was drunk.

Mr. SMYSER. What do you say now—was he drunk?

Mr. TYLER. I don't know, sir. You asked me then was he drunk, and to my knowledge I told you I didn't know.

Mr. HAY. Did you see Mr. Maenche, before the witnesses came down here, talking with other witnesses?

Mr. TYLER. I didn't see him talking to any in his office; I saw him talking to Miss Nellie Dement.

The CHAIRMAN. Before she testified or afterwards?

Mr. TYLER. I think it was before. I heard that Miss Nellie Dement and two or three other persons got papers, and then I saw Mr. Maenche talk with them.

Mr. CLARK. Mr. Chairman, before you call another witness I would like to make one statement and have it go into the record. I am boarding at Doctor Emmons's house, and that is how I happened to be there and meet this witness. I would not like to have it appear in the record just as it has been stated, without any explanation.

Mr. SMYSER. There is nothing here to hurt you.

Mr. CLARK. I do not think there is; but I want to make that explanation.

The CHAIRMAN. I would say to the committee that the sergeant-at-arms has returned one of our subpoenas with the statement that the husband of the lady said he would not allow her to come. I submit

to you the question as to what is the result of her not coming. This is one of the witnesses that Mr. Evans mentioned, Fanny L. Donaldson. The sergeant-at-arms served the subpoena on her, but the lady's husband would not allow her to come.

The SERGEANT-AT-ARMS. The lady was here, but her husband would not let her take the summons. He took the summons himself out of her hand and tore it up and slammed the door in my face.

The CHAIRMAN. Will this be evidence of a cumulative character?

Mr. EVANS. It would not be exactly cumulative; but still it would be on the same lines as the testimony you have already had.

The CHAIRMAN. There is also a telegram here coming to the Sergeant-at-Arms from Mrs. Jennie Coal, of South Pine, Richmond, Va., which says that she received the summons, but owing to the sickness of her husband it was impossible for her to come at present.

Mr. EVANS. I think she will be here on Monday.

The CHAIRMAN. We will leave that subject for the time being.

TESTIMONY OF JESSE S. A. COOK.

JESSE S. A. COOK, being first duly sworn, was examined, and testified as follows:

The CHAIRMAN. Where do you reside?

Mr. COOK. 301 L street southeast.

The CHAIRMAN. What is your occupation?

Mr. COOK. I am doing electrical work and machinist's work on automobiles.

The CHAIRMAN. Were you ever an attendant at St. Elizabeth's Hospital?

Mr. COOK. Yes, sir.

The CHAIRMAN. For how long?

Mr. COOK. Eight months.

The CHAIRMAN. Was Doctor White superintendent at the time?

Mr. COOK. I never worked under Doctor White. He signed my recommendation, and that was all.

The CHAIRMAN. You resigned the very day he came in?

Mr. COOK. Yes, sir; the day he went on duty I left. I gave him my two weeks' notice and got a recommendation from him, and Doctor White signed it.

TESTIMONY OF ANGELO SCHNEIDER.

ANGELO SCHNEIDER, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. What is your full name?

Mr. SCHNEIDER. Angelo Schneider.

The CHAIRMAN. Where do you live?

Mr. SCHNEIDER. At 1009 G street southeast.

The CHAIRMAN. Were you ever employed at St. Elizabeth's Hospital?

Mr. SCHNEIDER. Not by the Government, but by a contractor.

The CHAIRMAN. Who was your employer?

Mr. SCHNEIDER. Horton & Hemmington.

The CHAIRMAN. Were you engaged in working on the new building at St. Elizabeth's?

Mr. SCHNEIDER. Yes, sir.

The CHAIRMAN. What buildings were they?

Mr. SCHNEIDER. Buildings B, C, M, E, J, K, and L.

The CHAIRMAN. What were your duties there?

Mr. SCHNEIDER. I was iron worker.

The CHAIRMAN. When was this?

Mr. SCHNEIDER. About three or four years ago.

The CHAIRMAN. I do not see the relevancy of this testimony.

Mr. HAY. As I read this statement, the relevancy of it is this: That this work which was being put up was received by a person appointed by Doctor White, and that work was very inferior. If it was the duty of Doctor White to superintend the construction of these buildings over there he ought not to receive inferior work.

The CHAIRMAN. You are excused.

TESTIMONY OF OTIS WILSON.

OTIS WILSON, being first duly sworn, was examined, and testified as follows:

The CHAIRMAN. Where do you reside?

Mr. WILSON. At 7092 Eighth street NE.

The CHAIRMAN. What is your business?

Mr. WILSON. I am railroading at the present time.

The CHAIRMAN. Were you ever an attendant at St. Elizabeth's Hospital?

Mr. WILSON. Yes, sir.

The CHAIRMAN. When did you go there?

Mr. WILSON. I went there the 4th day of August, 1900.

The CHAIRMAN. When did you leave?

Mr. WILSON. I left there the 19th of January, 1906.

The CHAIRMAN. Did you leave the hospital of your own accord, or were you discharged?

Mr. WILSON. I was discharged on the 19th of February, 1906.

The CHAIRMAN. Why were you discharged?

Mr. WILSON. I was accused of hitting a patient.

The CHAIRMAN. Did you hit him?

Mr. WILSON. No, sir; I did not then.

The CHAIRMAN. Did you ever hit him?

Mr. WILSON. Well, I don't know that I hit him in particular. I have done it in self-defense.

The CHAIRMAN. You have hit patients?

Mr. WILSON. Yes, sir; of course I have had to do it or get beat up; one or the other. I had to protect myself.

The CHAIRMAN. What was this particular scrap you were in which caused your discharge?

Mr. WILSON. It was shaving morning. We shaved once a week.

The CHAIRMAN. You mean you shaved the patients?

Mr. WILSON. We shaved the patients; and he objected to getting into the chair to be shaved. Of course I had charge of the work and

Mr. Ferguson said to me——

The CHAIRMAN. Who was he?

Mr. WILSON. An attendant in the ward with me. He said the man wouldn't get shaved, and I told him he would have to get shaved. I started in to take him to the chair and he jumped me.

The CHAIRMAN. He did what?

Mr. WILSON. He jumped on me. He caught hold of me and started to strike me. He was a very large patient. I suppose he would weigh a couple of hundred pounds. So I caught hold of him, and the floor was very slippery and we both slipped up on the floor. He fell on top of me, but I rolled him over, and when I rolled him over I did slap him kind of on his backside. So when I got up, Mr. Carter was standing there, the supervisor, and he says, "Mr. Wilson, you ought not to do that." I said, "But it couldn't be helped, Mr. Carter." So he went on and reported it to Doctor Logie. Doctor Logie sent me word not to work any longer. So I went over to see Doctor White to investigate this matter, and Doctor White said that he didn't see anything else to do but to suspend me.

The CHAIRMAN. So you were discharged?

Mr. WILSON. Yes, sir.

The CHAIRMAN. You have told all that happened?

Mr. WILSON. Yes, sir.

The CHAIRMAN. All you did was to slap him?

Mr. WILSON. That is all. Mr. Carter said I straightened myself out and struck him a blow as hard as I could. I told Mr. Carter that if I did strike him as hard as I could, I thought I could put a bruise on him. Doctor White went over and examined the man himself and found him perfectly sound, with no bruises on him.

The CHAIRMAN. Were you ever accused of beating a patient before that?

Mr. WILSON. No.

The CHAIRMAN. Did you ever beat them?

Mr. WILSON. I have had trouble with them.

The CHAIRMAN. Did you ever beat them?

Mr. WILSON. I protected myself.

The CHAIRMAN. Did you ever strike any patient with your fist?

Mr. WILSON. Yes; of course I have. I don't suppose there is an employee there—

The CHAIRMAN. What for?

Mr. WILSON. What are you going to do if a man gets off and is going to kill you or take your keys from you? You have either got to hit him or get hit—one or the other.

The CHAIRMAN. Were you ever hit by a patient over there?

Mr. WILSON. Many a time, yes, sir; hundreds of times.

The CHAIRMAN. Did you always hit back?

Mr. WILSON. Not always. I felt sorry for some of them, simply because they didn't know what they were doing. But to some of them I had to do it. They were men that were strong and able, and I had to protect myself, or else they would have taken my keys and gone out and everything else. So I had to do it.

The CHAIRMAN. Did you ever see the board of visitors there?

Mr. WILSON. I saw them once at the time they had a meeting or an investigation over there.

The CHAIRMAN. What investigation was it?

Mr. WILSON. It was something similar to this—in regard to eating.

The CHAIRMAN. Was it held by the board of visitors?

Mr. WILSON. I think so.

The CHAIRMAN. When was that meeting held?

Mr. WILSON. I don't just remember.

The CHAIRMAN. A year ago or two years ago?

Mr. WILSON. It was about a year ago, I think.

The CHAIRMAN. Since Doctor White has been superintendent?

Mr. WILSON. Yes, sir; Doctor White was there.

The CHAIRMAN. Did not the board of visitors recently visit the asylum?

Mr. WILSON. Well, they say so; but I never saw them, to tell you the truth.

The CHAIRMAN. Do you know whether one of the board of visitors came through the ward you had charge of?

Mr. WILSON. No, sir; I never saw them through my ward in my life.

The CHAIRMAN. Did the board of visitors have a regular day for making their visit?

Mr. WILSON. Yes, sir; on the first Tuesday in each month.

The CHAIRMAN. Why didn't you see them then?

Mr. WILSON. Because we worked on what they called the back ward, and I suppose they didn't come through there. Another thing, on that day we always had to take the patients out. We were supposed to keep them out until the board of visitors went through.

The CHAIRMAN. Who told you to do that?

Mr. WILSON. That was the orders. That was when I was working on the west side. Of course, in the new buildings we never saw any of the board of visitors.

The CHAIRMAN. Who ordered you to take them out when the board of visitors came?

Mr. WILSON. The supervisor.

The CHAIRMAN. Do you know his name?

Mr. WILSON. Mr. Burch.

The CHAIRMAN. He told you to take the poor patients out of the way—over the hill, or whatever you call it?

Mr. WILSON. On committee day, yes, sir; certainly; and if it was raining—

The CHAIRMAN. Why did you do that?

Mr. WILSON. I don't know what the object was.

Mr. HAY. If it was raining, what?

Mr. WILSON. If it was raining we had to go to work and change their clothes in case they should come through, although I never saw them come through there.

The CHAIRMAN. You mean change their clothes and put better clothing on them?

Mr. WILSON. Yes; put better clothing on them. Then after half-past 3 or 4 o'clock we would change them back.

Mr. HAY. What was the general treatment of the inmates there for the purpose of keeping them under control, so far as you know?

Mr. WILSON. With some of them it was pretty rough.

Mr. HAY. How rough? How did you control them?

Mr. WILSON. If a man was very violent, he was put in cuffs or a strait-jacket.

Mr. HAY. Was that generally done?

Mr. WILSON. Right often.

Mr. HAY. Did you see anybody put towels around the necks of the patients?

Mr. WILSON. I don't know about there being wet towels; but I have seen towels put around them, though.

Mr. HAY. In what way?

Mr. WILSON. Throw a towel around their neck and twist them to cut the wind off, so as to do something with them.

Mr. HAY. Did you ever do that?

Mr. WILSON. I have helped to do it.

Mr. SMYSER. Was it necessary to do that?

Mr. WILSON. Yes, sir; it was.

The CHAIRMAN. Why; what would have happened if you had not done it?

Mr. WILSON. Possibly the man would have opened the ward and taken the keys, and it is hard to tell what would have happened. Sometimes there was one of us in the ward and never over two. The last eighteen months there was never but two in the ward, and three-fourths of the time, I venture to say, there was no one else but myself in the ward with thirty patients.

The CHAIRMAN. What were these cuffs made of?

Mr. WILSON. Of leather.

The CHAIRMAN. Is there a strap attached to each of the cuffs, and the cuff put on at the wrist?

Mr. WILSON. Yes; they call it a muff, I believe. It is a leather concern, and they put their hands in there like this [indicating], and then they put their hands in front of them like this [indicating].

The CHAIRMAN. Is that what you mean by cuffs?

Mr. WILSON. Those are muffs.

Mr. SMYSER. Did you ever put them on?

Mr. WILSON. Yes, sir.

Mr. SMYSER. What for?

Mr. WILSON. To keep a man quiet.

Mr. SMYSER. Was it necessary to do it?

Mr. WILSON. It was, sir. The last patient I ever helped put them on was a man by the name of John Callahan.

Mr. SMYSER. What was the matter with him?

Mr. WILSON. He was an epileptic and he would have fits. When he had a fit he was very hard to hold. The last time I ever helped to put them on him Mr. Carter came in and wanted to know what was the matter with the patient, and I told him he had a fit. He said: "Go upstairs and get Mr. Heyden and put the cuffs on him." I went up and got Mr. Heyden and another man and put the cuffs on him.

Mr. SMYSER. Was that a proper thing to do with the patient in the condition he was in?

Mr. WILSON. I couldn't say.

Mr. SMYSER. I am asking you whether it was or not?

Mr. WILSON. I suppose it was. If it hadn't been they wouldn't have ordered it.

Mr. SMYSER. I am not asking you what you did under orders. I am asking you as an attendant there, whether, with that man in the condition he was in at the time when you put those cuffs on him, it was a proper thing to do?

Mr. WILSON. I don't know whether it was or not. I suppose if he

had been put in a room where there was not anything to hurt, it would have been better.

Mr. SMYSER. Had you a room there like that to put him in?

Mr. WILSON. No; I didn't have any room.

Mr. SMYSER. Take the surroundings and his condition, with no place to put him; what do you say now, in your opinion, as to whether that was a proper thing to do, to care for that man in that way?

Mr. HAY. Mr. Wilson, do you think the harsh treatment pursued there by attendants could be obviated if there was sufficient number of attendants?

Mr. WILSON. I certainly do, sir.

Mr. HAY. What do you say about the food there?

Mr. WILSON. Well, the food is right hard.

Mr. HAY. What do you mean by right hard?

Mr. WILSON. On Sundays the food is pretty good. They have roast beef and potatoes and tomatoes and different things on Sundays; but through the week the food is pretty tough, and the supper especially, unless a patient works. If a patient worked he got meat for supper.

Mr. HAY. You were there three years during the time the present superintendent was there?

Mr. WILSON. I was there from the time he came there until the 19th day of January.

Mr. HAY. How often during that time did Doctor White visit the wards you were in there?

Mr. WILSON. For the last eighteen months I was there I remember seeing Doctor White come through there twice—only twice up to the day I was discharged. He came there that morning to examine the patient to see if he could find a bruise on him. Doctor White said the man was sound, and that he couldn't find a scratch on him.

The CHAIRMAN. Did the other doctors come there frequently?

Mr. WILSON. Doctor Logie was there right frequently.

The CHAIRMAN. Every day?

Mr. WILSON. If he wasn't through the ward he was over in the building—the dispensary.

The CHAIRMAN. He was always where you could get at him easily enough when you wanted him?

Mr. WILSON. Doctor Logie?

The CHAIRMAN. Yes.

Mr. WILSON. Yes, sir.

Mr. HAY. Were any of the other attendants discharged because of cruel treatment by them of patients?

Mr. WILSON. I think so. I couldn't call any names at the present time. There has been quite a number discharged over there since I was there. I can't say for certain, but I think so.

Mr. HAY. Do you know of any instance where an attendant was cruel, and was seen by the person in authority over him, and failed to be discharged?

Mr. WILSON. Well, about a week before I was discharged there was an attendant upstairs who had some trouble with a patient. The supervisor went up there and asked him if he didn't have trouble with that patient, and he told him yes; he had to do it; but there was nothing more said of it

Mr. HAY. That is the only instance you know of?

Mr. WILSON. Well, yes; here of late.

Mr. HAY. Here of late? You mean during Doctor White's superintendency?

Mr. WILSON. Yes, sir.

The CHAIRMAN. Have you talked to anybody about this testimony that you are giving now?

Mr. WILSON. You say, have I talked to anybody?

The CHAIRMAN. Yes.

Mr. WILSON. I saw Mr. Emmons the other night.

The CHAIRMAN. Did he send for you?

Mr. WILSON. Did he? Yes, sir.

The CHAIRMAN. He asked you to come and see him?

Mr. WILSON. Yes, sir.

Mr. SMYSER. You mean Doctor Emmons?

Mr. WILSON. Doctor Emmons; yes, sir.

Mr. SMYSER. Was a statement of what you have testified to be taken down?

Mr. WILSON. Well, I don't know; perhaps a part of it was.

Mr. SMYSER. I am handed a paper which I suspect is the statement I refer to. Your statement would indicate that when the board of visitors would come out there, you were instructed to get the patients out of the building, out of the way, so that they could not be seen. If there is anything in that, I want to know it.

Mr. WILSON. If there is anything in it?

Mr. SMYSER. Yes.

Mr. WILSON. We had orders to take them out.

Mr. SMYSER. Who gave the orders?

Mr. WILSON. The supervisors.

Mr. SMYSER. Who were they?

Mr. WILSON. Mr. Burch. I say it was during the time I was working over on the west side.

Mr. SMYSER. Was the idea to take the patients away so that the board of visitors could not see them?

Mr. WILSON. Well, I don't know what their idea was. I couldn't say.

Mr. SMYSER. What do you mean by saying that you had orders to take them away?

Mr. WILSON. To take them out for a walk.

Mr. SMYSER. The statement concludes: "Would hold the visitors off long enough by sending word that patients were at dinner." If there was any trick or device resorted to to keep the board of visitors from seeing these patients, and you know it, I want you to tell me?

Mr. WILSON. Well, whether they wanted to keep the board of visitors from seeing them or not I couldn't say. It looked very much like it, though; don't you think so? They were taken out on good days. Their clothes were not changed. If it was a rainy day their clothes were changed. So it looked as though they were taken out to keep the board of visitors from seeing them. That is the way I look at it. I may be mistaken.

Mr. SMYSER. Did you get any order to this effect: I want you to get these patients out so the board of visitors can not see them?

Mr. WILSON. No, sir.

Mr. SMYSER. Is that your own inference?

Mr. WILSON. We got orders to take the patients away.

Mr. SMYSER. That is not my question. Did you get orders to take the patients out so that the board of visitors could not see them?

Mr. WILSON. No, sir.

Mr. SMYSER. That is your own inference?

Mr. WILSON. They didn't say anything about so the board of visitors couldn't see them. They said they wanted the men to go out.

Mr. SMYSER. Was the board of visitors mentioned in connection with taking out the patients?

Mr. WILSON. Yes, indeed.

Mr. SMYSER. What was it?

Mr. WILSON. Well, "To-day is the board of visitors' day, and I want the men to go out"—just in that way. "I want to have everything looking nice." That is the day we always changed the roller towels. We have roller towels that they wiped on the last thing when we were taking the men out, and the roller towel is always changed that day so that they looked nice and clean.

Mr. SMYSER. Go on. What else?

Mr. WILSON. And other days we only put up the roller towels once a day, and that day they are put up twice a day. They are put up every morning, and in the afternoon after dinner, when we get ready to go out, the roller towels are changed again. That is, on the committee day. It is only that day, though, that it is done.

Mr. SMYSER. Was that to make the concern look nice?

Mr. WILSON. Certainly; we wanted it to look as nice as we could, of course.

Mr. SMYSER. Had you orders to do that, or was that of your own accord?

Mr. WILSON. Well, I don't know that we had orders exactly to do that; but if we went out and neglected, and didn't do it, we got a calling down about it.

Mr. SMYSER. Who ever called you down about it?

Mr. WILSON. The supervisors. They had it in charge.

Mr. SMYSER. Give us the name of the supervisor.

Mr. WILSON. Mr. Burch was the man. He was the man that looked after those things.

Mr. SMYSER. He called you down, did he?

Mr. WILSON. Yes, sir; he would always get after us. He wanted to know what was the trouble, the reason that those towels were not changed, or something like that.

Mr. SMYSER. Would that be on the visitors' day?

Mr. WILSON. Only on visiting day that was done.

The CHAIRMAN. Is that the only time you were told to take all the patients out?

Mr. WILSON. Well, particular; yes, sir.

The CHAIRMAN. How often did you take all the patients out?

Mr. WILSON. As a general thing, if it was good weather, we take them out every day for a walk.

The CHAIRMAN. Was it any different on the board of visitors' day than on any other day?

Mr. WILSON. We kept them out later in the afternoon. We stayed out.

Mr. BARCHFELD. What object would the supervisor have in telling you to keep them out longer than usual?

Mr. WILSON. What his object was I don't know, sir. I never asked.

Mr. BARCHFELD. Could you discern any object as to why they should be kept out longer than usual?

Mr. WILSON. I don't know whether it was because he thought the board of visitors would be out, and didn't want them to see the way they were kept—their clothing—or what.

Mr. SMYSER. What was there in the way they were kept that should be concealed from the board of visitors, if anything?

Mr. WILSON. Their clothing was not very nice. The clothing was very ordinary that they wore every day. Of course some of the patients were very destructive, and it was very hard to keep clothing on them.

Mr. SMYSER. Well, I do not suppose they made a pretense out there of keeping these patients dressed up all the time. Was there anything in the situation there, any reason, why these patients should be gotten away so that the board of visitors could not see the actual condition there that you know of?

Mr. WILSON. None that I know of, sir.

TESTIMONY OF JESSE OWSLEY.

JESSE OWSLEY, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Are you a patient at St. Elizabeth's?

Mr. OWSLEY. Yes, sir.

The CHAIRMAN. How long have you been there?

Mr. OWSLEY. About a year and three months.

The CHAIRMAN. How did you come to go there?

Mr. OWSLEY. I went there from Danville, Ill.

The CHAIRMAN. From the asylum at Danville?

Mr. OWSLEY. Yes, sir.

Mr. HAY. From the Soldiers' Home?

Mr. OWSLEY. Yes, sir.

The CHAIRMAN. From the Soldiers' Home there?

Mr. OWSLEY. From the Soldiers' Home.

The CHAIRMAN. Were you in the Army?

Mr. OWSLEY. Yes, sir.

The CHAIRMAN. And were you discharged from the Army and sent to the Danville Home?

Mr. OWSLEY. I was not sent there. I went there.

The CHAIRMAN. You went there?

Mr. OWSLEY. Yes, sir.

The CHAIRMAN. You got your honorable discharge from the Army?

Mr. OWSLEY. Yes, sir.

The CHAIRMAN. Were you ever badly treated at St. Elizabeth's?

Mr. OWSLEY. Yes, sir.

The CHAIRMAN. When, and by whom?

Mr. OWSLEY. About the 14th of April, I think it was.

The CHAIRMAN. Of this year?

Mr. OWSLEY. Yes, sir.

The CHAIRMAN. This year?

Mr. OWSLEY. Yes, sir; this year.

The CHAIRMAN. What was done to you?

Mr. OWSLEY. Well, I was knocked down, I was kicked, and I was choked.

The CHAIRMAN. By whom?

Mr. OWSLEY. By Mr. Alexander, I believe, was the attendant's name.

The CHAIRMAN. Was Alexander an attendant?

Mr. OWSLEY. I think he is an attendant of the dining hall. He was not an attendant of the patients.

The CHAIRMAN. Was this in the dining hall where this happened?

Mr. OWSLEY. No; it was out in the hall.

The CHAIRMAN. What was the matter? Why were you knocked down?

Mr. OWSLEY. He asked me to take a broom and sweep the floor, and I objected.

The CHAIRMAN. Why did you object?

Mr. OWSLEY. Because I was not sent there to sweep floors, and one thing another. I was sent there as a crazy man.

The CHAIRMAN. You were sent there as a crazy man?

Mr. OWSLEY. Yes, sir.

The CHAIRMAN. Did you say you would not sweep the floor?

Mr. OWSLEY. I did.

The CHAIRMAN. And then did this attendant knock you down?

Mr. OWSLEY. He called me a black * * * and he says: "You will sweep the floor; I will see that you do," and he knocked me down.

The CHAIRMAN. Did you hit the attendant?

Mr. OWSLEY. No, sir.

The CHAIRMAN. Did you offer any resistance at all?

Mr. OWSLEY. I offered the resistance saying that I wouldn't do it; I wouldn't do the work.

The CHAIRMAN. Did you not scrap with the attendant yourself?

Mr. OWSLEY. No, sir; I didn't hit him a lick.

The CHAIRMAN. Were there any other patients there at the time?

Mr. OWSLEY. Oh, yes.

The CHAIRMAN. Were there any other attendants there at the time?

Mr. OWSLEY. Yes, sir.

The CHAIRMAN. Who were the other attendants, do you know?

Mr. OWSLEY. I don't know his name.

The CHAIRMAN. That you say was in April?

Mr. OWSLEY. I think it was in April.

The CHAIRMAN. Of this year?

Mr. OWSLEY. I am not real sure, but it happened this year. I am satisfied of that.

The CHAIRMAN. Do you think you ought to be in the asylum now, or do you think you ought to get out?

Mr. OWSLEY. I think I ought to get out.

The CHAIRMAN. You mean you think you are all right now, do you?

Mr. OWSLEY. Yes, sir.

The CHAIRMAN. Do you think you were ever so sick that you ought to have been sent there?

Mr. OWSLEY. Well, no; I don't think I was ever so sick that I ought to have been sent there.

The CHAIRMAN. Who sent you there; do you know?

Mr. OWSLEY. I was sent there by the Danville——

The CHAIRMAN. By whom?

Mr. OWSLEY. No; I don't know who sent me there. I was sent there from Danville—the Home. I don't know who had the right to send me there.

The CHAIRMAN. Had you had any trouble in the Home at Danville?

Mr. OWSLEY. No, sir.

The CHAIRMAN. How long had you been at Danville?

Mr. OWSLEY. About two years.

Mr. HAY. What were you discharged from the Army for?

The CHAIRMAN. He was honorably discharged.

Mr. OWSLEY. I was honorably discharged.

Mr. HAY. He must have had some reason for it. What was the cause of your discharge from the Army? Were you sick?

Mr. OWSLEY. No; I wasn't sick when I was discharged. I was discharged with all the attendants——

Mr. HAY. I am talking about when you got your discharge from the Army.

Mr. OWSLEY. Oh, I had rheumatism when I was discharged.

Mr. HAY. You were discharged for physical disability?

(No answer.)

Mr. HAY. He does not understand that.

Mr. SMYSER. Had you a wound?

Mr. OWSLEY. No, sir.

Mr. HAY. How long did you serve in the Army?

Mr. OWSLEY. About eight months.

The CHAIRMAN. Did you make an application for discharge from the Army yourself?

Mr. OWSLEY. No, sir.

The CHAIRMAN. You did not?

Mr. OWSLEY. No, sir.

Mr. HAY. You were discharged by a board, were you?

Mr. OWSLEY. I was discharged by a board.

Mr. BARCHFELD. What regiment were you connected with?

Mr. OWSLEY. Eighth Illinois, Company B.

Mr. BARCHFELD. Was that the civil war?

Mr. OWSLEY. I went to Cuba.

Mr. BARCHFELD. The Spanish war?

Mr. OWSLEY. The Spanish war.

Mr. HAY. You were in the volunteer army, then?

The CHAIRMAN. Were you ever badly treated out at the hospital, besides this one time you speak of?

Mr. OWSLEY. That is about all I know of.

The CHAIRMAN. Do you ever have any trouble? Is your health bad now, at all?

Mr. OWSLEY. Well, it is not very bad.

The CHAIRMAN. Do you ever fall down without knowing why you do it?

Mr. OWSLEY. No. I have sense enough to know when these spells are coming on to me, and I go and set down.

The CHAIRMAN. And then you go and lie down, or go somewhere where you will not fall down?

Mr. OWSLEY. Yes, sir.

The CHAIRMAN. Can you feel it when these fits are coming on?

Mr. OWSLEY. Yes, sir.

The CHAIRMAN. Do they happen pretty frequently now?

Mr. OWSLEY. No, sir.

The CHAIRMAN. When did you have the last one; do you know?

Mr. OWSLEY. Well, about three or four days ago, I think; but it was very light. It was a very light one. I don't have them very bad.

The CHAIRMAN. They take care of you, then, and get you rid of them, and then you get all right again, I suppose?

Mr. OWSLEY. Who take care of me?

Mr. HAY. Do you draw a pension?

Mr. OWSLEY. Yes, sir.

The CHAIRMAN. Do the people in the hospital take care of you when you have these fits?

Mr. OWSLEY. No, sir.

The CHAIRMAN. What?

Mr. OWSLEY. No, sir.

The CHAIRMAN. Do you mean that they just let you alone? When you have these fits and get over them, you do not know what happens anyway, do you?

Mr. OWSLEY. When I have a real spell, of course I don't know what happens, but as soon as I am over it I know all about it.

The CHAIRMAN. What ward are you in now? Is there a special building now that is set apart for men who have fits?

Mr. OWSLEY. No, sir.

The CHAIRMAN. What ward are you in?

Mr. OWSLEY. I don't know what they call that building.

Mr. HAY. You say you draw a pension?

Mr. OWSLEY. Yes, sir.

Mr. HAY. How much do you draw a month?

Mr. OWSLEY. I have never found that out.

Mr. HAY. You have never found out how much pension you draw a month?

Mr. OWSLEY. No, sir.

Mr. HAY. Have you been drawing a pension ever since you left the Danville home?

Mr. OWSLEY. No, sir. This pension came to me since I have been here in this place.

Mr. HAY. And it was paid to the superintendent of the asylum? Is that it?

Mr. OWSLEY. I suppose so.

The CHAIRMAN. You do not know whether it is \$6 or \$12, or what it is?

Mr. OWSLEY. I don't know what it is.

Mr. HAY. Have you ever inquired? Have you ever asked how much it was?

Mr. OWSLEY. Yes; I have asked.

Mr. HAY. Who have you asked?

Mr. OWSLEY. I have asked the agent.

Mr. HAY. The agent?

Mr. OWSLEY. The agent who collected, who drew this pension for me; but he has failed to tell me, so of course I have never asked since.

The CHAIRMAN. Do you get pretty good food to eat?

Mr. OWSLEY. Well, no; not extra.

The CHAIRMAN. But you can eat it all right, can you not?

Mr. OWSLEY. Sometimes.

The CHAIRMAN. Do you get any different food there from any of the rest of them?

Mr. OWSLEY. No; I don't know as I do.

The CHAIRMAN. You get the same food? Do you go in to eat in the general dining room, with all the rest?

Mr. OWSLEY. No; the colored people are to themselves.

The CHAIRMAN. I mean with the rest of the colored people.

Mr. OWSLEY. Yes, sir.

The CHAIRMAN. How many of them are there that eat in that room, about, do you think?

Mr. OWSLEY. I couldn't make that statement.

The CHAIRMAN. Is it a great big room full?

Mr. OWSLEY. A big room full.

The CHAIRMAN. Are there a hundred of them?

Mr. OWSLEY. I suppose there is, about.

Mr. HAY. How does the food out there compare with the food you got out at the home in Illinois?

Mr. OWSLEY. Well, sir.

Mr. HAY. What?

Mr. OWSLEY. Yes, sir.

Mr. HAY. Is the food that you got out at the home in Illinois as good as what you get out here?

Mr. OWSLEY. Yes, sir.

TESTIMONY OF OWEN S. ALLEN.

OWEN S. ALLEN, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. What is your name?

Mr. ALLEN. Owen S. Allen.

The CHAIRMAN. Where do you live?

Mr. ALLEN. Camp Springs, Md.

The CHAIRMAN. Were you an attendant at St. Elizabeth's Hospital?

Mr. ALLEN. Yes, sir.

The CHAIRMAN. When?

Mr. ALLEN. I was an attendant there; I went there on September 15, 1900, and stayed there three years and six months.

The CHAIRMAN. Were you there while Doctor White was there?

Mr. ALLEN. Yes, sir.

The CHAIRMAN. How long had he been there when you left?

Mr. ALLEN. I don't exactly know, but he had been there for about six or eight months, or something of that sort.

The CHAIRMAN. Did you leave voluntarily or were you discharged?

Mr. ALLEN. I was discharged.

The CHAIRMAN. What for?

Mr. ALLEN. For sleeping on duty.

The CHAIRMAN. Were you one of the night attendants?

Mr. ALLEN. I was night watchman; looking after the new buildings.

The CHAIRMAN. Did you have anything to do with patients?

Mr. ALLEN. I did; yes, sir.

The CHAIRMAN. When, night or day?

Mr. ALLEN. Up until I went out to the new buildings I worked on the wards, in the Dawes Building. He sent me out there as night watchman.

The CHAIRMAN. Who sent you?

Mr. ALLEN. Doctor Stack.

The CHAIRMAN. You attended patients under Doctor Stack?

Mr. ALLEN. Well, under Doctor White also.

The CHAIRMAN. How long were you out on the buildings as night watchman?

Mr. ALLEN. About two and a half months—two months and fifteen days.

The CHAIRMAN. Can you tell exactly how long it was that you were an attendant on patients while Doctor White was there?

Mr. ALLEN. No, sir; I couldn't tell exactly, because it has been some while ago and I don't exactly remember.

The CHAIRMAN. What ward were you in?

Mr. ALLEN. Dawes Building, ward 2.

The CHAIRMAN. Did you ever see any cruelty to patients there?

Mr. ALLEN. Yes, sir; I have.

The CHAIRMAN. Will you name some instance of it?

Mr. ALLEN. I don't know as I could, exactly; but I know in a good many cases I was on the ward by myself, and about 35 to 45 patients, and I had to look after them in the evenings and put them to bed at night. Often, you know, they would become unruly and I would have to do the best I could.

The CHAIRMAN. What did you do to them?

Mr. ALLEN. Well, I would have to take them and throw them in the rooms and lock them up.

The CHAIRMAN. Did you ever hit any yourself?

Mr. ALLEN. Well, I have, in self defense; yes, sir.

The CHAIRMAN. You thought it was necessary to do it at times, did you?

Mr. ALLEN. I had to do it to protect myself.

The CHAIRMAN. You mean that they would hurt you if you had not hurt them?

Mr. ALLEN. Yes, sir.

Mr. SMYSER. You did that in self-defense?

Mr. ALLEN. Yes, sir.

Mr. SMYSER. Was the patient assaulting you?

Mr. ALLEN. Yes, sir.

Mr. SMYSER. And you struck back; is that it?

Mr. ALLEN. Well, I don't say that I voluntarily struck a patient; but we would have to catch them and throw them down and get them under control the best way you can.

Mr. SMYSER. Was that necessary?

Mr. ALLEN. You had to do it.

Mr. SMYSER. Why?

Mr. ALLEN. You wouldn't stay there and let the patients do you up with a mopstick or a broomstick or something of that sort.

Mr. SMYSER. I would not be there at all if I could avoid it. But is that the way this came about, as you have described it?

Mr. ALLEN. Yes, sir.

The CHAIRMAN. What do you think about the food in the asylum? Was it good or bad?

Mr. ALLEN. It was very poor.

The CHAIRMAN. What was the matter with it?

Mr. ALLEN. In the first place, the meat was not very good, and then the way it was served—meat and potatoes, and such as that, you know. The potatoes came on with the peelings on them, and dirt and manure, just the way they was dug out of the ground, and the meat was served where in a good many cases it was rotten. It was not fit to eat.

The CHAIRMAN. Did you ever make any complaint of this food?

Mr. ALLEN. I was never in charge of a ward, and therefore I never made a complaint.

The CHAIRMAN. Did you ever make a complaint to a man who was in charge of a ward?

Mr. ALLEN. Yes, sir; we often used to set down and talk about it.

Mr. HAY. Mr. Allen, what about bathing? Do you know anything about the baths?

Mr. ALLEN. Yes, sir.

Mr. HAY. Did the patients ever bathe, more than one of them, in the same water?

Mr. ALLEN. Yes, sir.

Mr. HAY. How often did that happen?

Mr. ALLEN. Every bathing day.

The CHAIRMAN. Did you have charge of bathing the patients?

Mr. ALLEN. No, sir; not particularly.

The CHAIRMAN. Did you ever do it?

Mr. ALLEN. Yes, sir.

The CHAIRMAN. Why did you not give them each fresh water?

Mr. ALLEN. Because we was always rushed.

The CHAIRMAN. Always what?

Mr. ALLEN. Always rushed. They were supposed to bathe as quickly as they possibly could, and then we would take the patients out for a walk.

The CHAIRMAN. You were supposed to give each one clean water for his bath?

Mr. ALLEN. Yes, sir.

The CHAIRMAN. So if you did not, it was your fault?

Mr. ALLEN. It was my fault in things of that kind; yes, sir.

Mr. HAY. Was the supervisor of the ward ever present when they bathed these people in the same water?

Mr. ALLEN. Occasionally he would come there.

Mr. HAY. Occasionally he was present?

Mr. ALLEN. Yes, sir.

Mr. HAY. Did he reprove you for it?

Mr. ALLEN. He never said anything about it.

Mr. HAY. Were any patients in your ward worked in the laundry?

Mr. ALLEN. Yes, sir.

Mr. HAY. When they came back from work in the laundry what was their condition?

Mr. ALLEN. Well, they often used to speak about the way they was abused there. They said often they was abused in the laundry, and had to work very hard.

Mr. HAY. Did you see any signs of any abuse of that kind?

Mr. ALLEN. I have known patients to come back from the laundry with black eyes and scratched faces; yes, sir. And I have heard them complain about being ill treated there several times.

Mr. HAY. Do you know anything about James Ogden, an attendant there?

Mr. ALLEN. James Ogden?

Mr. HAY. Yes, sir.

Mr. ALLEN. Yes, sir.

Mr. HAY. Do you know anything about his refusing to take patients out, because they were hungry?

Mr. ALLEN. He told me he refused to take them out because they were hungry, and didn't get enough to eat.

Mr. HAY. Where was he going to take them, and what were they doing?

Mr. ALLEN. He had them working down about the power house, wheeling coal.

Mr. HAY. When did this happen?

Mr. ALLEN. That was about three years ago.

Mr. HAY. Three years ago?

Mr. ALLEN. Yes, sir.

Mr. HAY. That was before Doctor White went there?

Mr. ALLEN. No; it was after Doctor White went there. It might not have been three years ago; probably it was two years and six months.

Mr. HAY. Were you ever an attendant at any other insane asylum?

Mr. ALLEN. Yes, sir.

Mr. HAY. Where?

Mr. ALLEN. Morris Plains, New Jersey.

Mr. HAY. What was the size of that institution?

Mr. ALLEN. Well, I think it was about 1,700 patients, we had.

Mr. HAY. 1,700?

Mr. ALLEN. About 1,700; yes, sir.

Mr. HAY. What was the comparative treatment of patients in that institution with patients out at St. Elizabeth's?

Mr. ALLEN. Well, I think the patients was treated a considerable lot better there than they was at St. Elizabeth's.

Mr. HAY. Did they have more attendants there than they have at St. Elizabeth's?

Mr. ALLEN. Yes, sir; they had more attendants and they got better food.

Mr. HAY. Who was the superintendent of that institution?

Mr. ALLEN. Doctor Evans.

Mr. HAY. Why did you leave there?

Mr. ALLEN. Why, I left on my own account.

Mr. HAY. You voluntarily left there?

Mr. ALLEN. Yes, sir.

Mr. BARCHFELD. What was your salary as an attendant at Morris Plains?

Mr. ALLEN. My salary was \$22.

Mr. BARCHFELD. What did you get at St. Elizabeth's?

Mr. ALLEN. \$27.50.

Mr. HAY. Do you think the severe treatment that sometimes has to be used because the patients are unruly could be obviated out at the asylum if they had more attendants?

Mr. ALLEN. Yes, sir; if they had more attendants I think they could avoid all ill treatment; but being on the ward alone with from 35 to 45 patients, you have to do the best that you possibly can. I think if they had more attendants it might be better.

Mr. HAY. How often did Doctor White go through the ward while you were there—on the ward you were on?

Mr. ALLEN. Why probably once a month—not more than that.

Mr. SMYSER. In doing what you did, which you have described as being in self-defense, were you unnecessarily cruel?

Mr. ALLEN. No, sir.

Mr. SMYSER. Did you use more force than was necessary to protect yourself?

Mr. ALLEN. No, sir. I treated the patients with as much respect as I possibly could.

Mr. SMYSER. But when there would come a time when you would have to protect yourself, you did it?

Mr. ALLEN. I did it.

Mr. SMYSER. And you thought you were doing the best that could be done under the circumstances; is that it?

Mr. ALLEN. Yes, sir; the best that I could do under the circumstances.

Mr. SMYSER. Did you mean to be cruel to the patients?

Mr. ALLEN. No, sir; I meant to be kind to them.

The CHAIRMAN. Was not that the way the attendants generally treated the patients?

Mr. ALLEN. Yes, sir.

The CHAIRMAN. In other words, they did not hit patients unnecessarily, did they, just for spite?

Mr. ALLEN. No, sir.

The CHAIRMAN. Can you always put dependence in what patients tell you?

Mr. ALLEN. No, sir; you can not always do it.

The CHAIRMAN. So that when a patient would come up from the laundry and say he had been badly treated, did you always believe him?

Mr. ALLEN. In a case of that kind you can't help but believe him.

Mr. SMYSER. When you would see his eyes blacked?

Mr. ALLEN. When you would see his eyes blacked, or his face scratched, or he would tell you he had been kicked in the ribs by some of the employees down there, you couldn't help but believe it.

The CHAIRMAN. But you did not know but what the man had been by some other patient down there, or something of that kind, did you?

Mr. ALLEN. No, sir; of course not.

The CHAIRMAN. You did not know?

Mr. ALLEN. No, sir; you could only take the patient's word for it.

The CHAIRMAN. And that can not always be depended upon, can it?

Mr. ALLEN. No, sir.

The committee (at 12.30 o'clock p. m.) took a recess until 2.30 o'clock p. m.

AFTER RECESS.

The committee reassembled at the expiration of the recess.

The CHAIRMAN. Mr. Snider, do you wish to be examined as a witness or is it your wife who wishes to be examined?

Mr. SNIDER. This morning as I was leaving home I was speaking to my wife, and I think probably she would be a better witness than I would be. I have only had a few minutes' notice, and I came right up here. I did not have any opportunity to go home and fetch her up.

The CHAIRMAN. Do you want to be a witness?

Mr. SNIDER. Yes, sir. I submitted the matter to a gentleman in the House, and if he chooses to have me testify I will do so.

The CHAIRMAN. You wrote a letter in which you asked to be called?

Mr. SNIDER. Are you Mr. Sulzer?

The CHAIRMAN. No; but he handed me your letter, and asked me to send for you, if you would like to give any testimony. I think you had better be sworn and give your testimony now, because we are very busy.

Mr. SNIDER. Thank you, sir.

The CHAIRMAN. And we want to get through with this as expeditiously as we can.

Mr. SNIDER. I am at your service.

TESTIMONY OF GEORGE L. SNIDER.

GEORGE L. SNIDER, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Mr. Snider, you reside in the City of Washington, do you not?

Mr. SNIDER. Yes, sir.

The CHAIRMAN. Are you employed in the Government service?

Mr. SNIDER. Yes, sir.

The CHAIRMAN. In what branch of the Government service?

Mr. SNIDER. The Treasury Department Life Saving Service.

The CHAIRMAN. Were any of your family ever patients at St. Elizabeth's?

Mr. SNIDER. Yes, sir; my daughter Elizabeth.

The CHAIRMAN. Was she there more than once?

Mr. SNIDER. No, sir.

The CHAIRMAN. When was she there?

Mr. SNIDER. About a year ago.

The CHAIRMAN. What was the matter with her?

Mr. SNIDER. Epilepsy.

The CHAIRMAN. How was she put in the asylum? Was she committed?

Mr. SNIDER. Through process of court.

The CHAIRMAN. Upon your application?

Mr. SNIDER. Yes, sir.

The CHAIRMAN. Did you visit the hospital and see her frequently while she was there?

Mr. SNIDER. Yes, sir.

The CHAIRMAN. How long was she there?

Mr. SNIDER. I judge four months—three or four months.

The CHAIRMAN. Had you ever any complaint to make of the asylum?

Mr. SNIDER. No, sir.

The CHAIRMAN. Was the attendance upon your daughter good or bad?

Mr. SNIDER. The attendance to my daughter was good. I did not have any complaints to make, because I took my child away from there. That is the way I registered my complaint.

The CHAIRMAN. Did you take her away before she was cured, do you mean, or was she cured there?

Mr. SNIDER. She could not be cured, sir. There was no expectation of curing her, but to care for her.

The CHAIRMAN. What was the cause of the criticism of the hospital that you had?

Mr. SNIDER. Well, because they had girls, middle aged women, and old women. They had them from 15 or 16 years up to 80 years, all together, a great number of them, and they had all degrees of this affliction.

The CHAIRMAN. Were these people all afflicted with epilepsy?

Mr. SNIDER. They were all afflicted with epilepsy, and one or two of them, in my opinion, should have been with a different class of patients altogether. There was no separation of them at all. There were mild cases, and bad cases, and one or two persons that were insane, I might say, and ought to have been elsewhere. They were there, and I did not think it a fit place for my child. Besides that, they had two excellent good women there, that were just simply worked to death.

The CHAIRMAN. You do not think they had enough attendants?

Mr. SNIDER. Oh, they had not.

The CHAIRMAN. How many people were there in the same ward where your daughter was?

Mr. SNIDER. I can only estimate it.

The CHAIRMAN. Yes.

Mr. SNIDER. I should say not less than thirty and not more than forty.

The CHAIRMAN. Was your daughter a pay patient?

Mr. SNIDER. Yes, sir.

The CHAIRMAN. How much did you pay?

Mr. SNIDER. I paid nothing, sir. The District paid for her, and when I found that I would have to pay for her I thought I could spend the \$20 a month better in another way than at the institution over there.

The CHAIRMAN. What do you mean by saying that the District paid for her?

Mr. SNIDER. The asylum authorities were paid by the District until the matter was settled as to who should pay for the child. Unfortunately for me I owned a piece of mortgaged land in Prince George County, and they said I would have to pay \$20 a month. Therefore, I could spend that \$20 a month better at home, and she would not be associated with these other poor afflicted people.

The CHAIRMAN. Is she at home now?

Mr. SNIDER. Yes, sir.

The CHAIRMAN. She is now in your care?

Mr. SNIDER. Yes, sir.

Mr. HAY. How old is she?

Mr. SNIDER. About sixteen—just past sixteen now.

The CHAIRMAN. You say that as far as the attendants were concerned, you had no complaint whatever to make of them?

Mr. SNIDER. They were excellent women.

The CHAIRMAN. What were their names? Do you know?

Mr. SNIDER. I don't know, sir; I often marvelled, though, about how they could manage such a company as they did.

The CHAIRMAN. They were kind and polite to the patients, were they?

Mr. SNIDER. They were kind, but they looked to me like they were women that were absolutely exhausted from their duties, at times.

The CHAIRMAN. Is there anything else you want to say in regard to the hospital, about this matter?

Mr. SNIDER. Well, we took great pleasure in furnishing clothing for the little girl—goods. We were informed that it was desirable that some of the patients be employed, and that some of these goods could be made up. The laundry is extremely hard on the clothes, and it is quite a subject to furnish the child with clothes there. We were enabled to buy better goods and have them made there, and we did it at the suggestion of the people there. We sent over the goods. I went over there about two weeks after my wife sent some articles over there, and it is hard enough to have such a trouble as that, but the nurse came out and handed me the goods that had been there for a couple of weeks. It seems that peremptory orders had been given changing that system, and we had to send the goods over there and I had to lug them back again two weeks afterwards.

The CHAIRMAN. They were not used?

Mr. SNIDER. They were not used. No clothes were given to her at all, and I think it was rather inhuman, when a person has a child under those conditions there, that they should treat them in that way. Some of the clothes are over there yet. They were not returned. We made two requests for them. Unfortunately, I do not know the numbers of the items, but my wife informed me this morning, to refresh my memory. I said "Those things were all returned. Was not that the case?" She said "No. You remember the list you sent over." I sent a list over there, and some of the goods that we bought and paid for have not been returned.

The CHAIRMAN. You say goods?

Mr. SNIDER. I mean outer garments.

The CHAIRMAN. Did you ever ask to have them returned?

Mr. SNIDER. Yes, sir; twice.

The CHAIRMAN. Whom did you see there?

Mr. SNIDER. I addressed the head of the institution; I think Doctor White.

The CHAIRMAN. By letter?

Mr. SNIDER. Yes.

The CHAIRMAN. Did you get any answer?

Mr. SNIDER. Yes, sir; I got some goods sent to the house.

The CHAIRMAN. Has he been informed by you, by letter, that there are some that are still there?

Mr. SNIDER. No, sir; I did not think it worth while. I wrote twice, and sent them a list, and they did not send them.

The CHAIRMAN. They sent some?

Mr. SNIDER. They sent some twice.

The CHAIRMAN. Did the doctor write any letter in response to yours?

Mr. SNIDER. There might have been a note or something like that. He said nothing of any consequence, but just simply in transmitting the articles.

Mr. HAY. Do you know anything about the food out there?

Mr. SNIDER. No, sir; but I guess the food must be wholesome, from the way my little girl looked there after a while. Of course that was in the female, and I only saw these people outside in a large room.

The CHAIRMAN. Do you want Mrs. Snider to come at some other time and testify in regard to this matter?

Mr. SNIDER. Well, that is something that I will leave entirely to you.

The CHAIRMAN. Would she merely testify to what you have testified in relation to?

Mr. SNIDER. No, sir; she would testify to something else. If I may speak from hearsay, I may relate an occurrence that she related to me this morning.

The CHAIRMAN. I think we had better not have that.

Mr. SMYSER. He simply has in mind that if Mrs. Snider would give substantially the same testimony you have given, there would perhaps be no necessity for calling her. If she has something new, or additional, it is a different thing.

Mr. SNIDER. May I say this? She knows of one occurrence to which she was an eye witness, and I was not.

The CHAIRMAN. Then she had better be here, I think.

Mr. SNIDER. I do not know anything about it myself.

Mr. HAY. I think she had better be summoned.

Mr. SMYSER. How frequently did your daughter have these spells?

Mr. SNIDER. Very irregularly. Sometimes she might have an attack every day, and sometimes it would be several days. Sometimes she might pass without any during the day, and maybe have a mild attack at night. They were irregular—very irregular.

The CHAIRMAN. Shall we communicate with you when we would like to have Mrs. Snider come?

Mr. SNIDER. Yes, sir.

The CHAIRMAN. I can give you ample notice.

Mr. SNIDER. Yes, sir; I would like to have you do so.

Mr. HAY. You can give the clerk her name and address.

Mr. SNIDER. I only had an hour's notice, and I was up town. The address is No. 7 N street southeast.

The CHAIRMAN. Could Mrs. Snider come here to-morrow morning?

Mr. SNIDER. I believe so; yes, sir.

The CHAIRMAN. Then, suppose you bring her here, or have her come here at 10 o'clock to-morrow morning. We will subpoena her if you prefer it?

Mr. SNIDER. Well, just as you wish.

The CHAIRMAN. It is perfectly immaterial to us.

Mr. SNIDER. Subpoena her, then. I did not know the subpoenas went out of here until I was served with one. I am entirely ignorant of such matters.

The CHAIRMAN. What is the address?

Mr. SNIDER. Mrs. George L. Snider, No. 7 N street, southeast.

The CHAIRMAN. We will have her subpoenaed for to-morrow morning at 10 o'clock. I think that is all, Mr. Snider.

TESTIMONY OF WILLIAM J. ELLIOTT.

WILLIAM J. ELLIOTT, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Your name is William J. Elliott?

Mr. ELLIOTT. Yes, sir.

The CHAIRMAN. Where do you reside?

Mr. ELLIOTT. Washington City.

The CHAIRMAN. At 728 13th street?

Mr. ELLIOTT. Yes, sir.

The CHAIRMAN. What is your occupation?

Mr. ELLIOTT. I am a newspaper man and a magazine writer.

The CHAIRMAN. Are you the editor, or connected with, any newspaper now?

Mr. ELLIOTT. I am the publisher now of the Washington Magazine.

The CHAIRMAN. What is the name of it?

Mr. ELLIOTT. The Washington Magazine.

The CHAIRMAN. Oh, the Washington Magazine. Do you know anything about the management of St. Elizabeth's asylum of your own knowledge, during the period since Doctor White has been superintendent?

Mr. ELLIOTT. I do not think I have visited the institution but once since Doctor White has been there.

The CHAIRMAN. When was that?

Mr. ELLIOTT. That was last December.

The CHAIRMAN. Did you stay there for any considerable length of time?

Mr. ELLIOTT. No, sir.

The CHAIRMAN. What part of the institution were you in?

Mr. ELLIOTT. Just around the grounds, and I met a few friends that were employed over there.

The CHAIRMAN. Do you know anything of your own knowledge with regard to the management of the hospital?

Mr. ELLIOTT. No, sir; not that I saw myself.

The CHAIRMAN. I do not think that we care to ask you any questions, then.

TESTIMONY OF WILBUR F. COGSWELL.

WILBUR F. COGSWELL, being duly sworn, was examined and testified as follows:

The CHAIRMAN. What is your name?

Mr. COGSWELL. Wilbur F. Cogswell.

The CHAIRMAN. Where do you reside?

Mr. COGSWELL. At 222 Thirteen-and-a-half street southwest, in this city.

The CHAIRMAN. Did you ever visit St. Elizabeth's Hospital?

Mr. COGSWELL. Yes, sir; a great many times.

The CHAIRMAN. Did you have any relative there?

Mr. COGSWELL. Yes, sir; my wife's mother was there.

The CHAIRMAN. What was her name?

Mr. COGSWELL. Her name was Amelia K. Hawk.

The CHAIRMAN. How frequently did you visit the insane asylum?

Mr. COGSWELL. How often?

The CHAIRMAN. Yes.

Mr. COGSWELL. Very often.

The CHAIRMAN. How long was this lady there?

Mr. COGSWELL. She was there, well, six weeks or perhaps two months. I could not tell very well without referring to the letters.

The CHAIRMAN. When?

Mr. COGSWELL. In 1905.

The CHAIRMAN. Was Doctor White the superintendent at the time?

Mr. COGSWELL. No, sir; Doctor Richardson.

The CHAIRMAN. You do not know anything about the hospital since Doctor White has had charge of it?

Mr. COGSWELL. I have forgotten the date he took charge there.

The CHAIRMAN. October 1, 1903. Have you been there since October 1, 1903?

Mr. COGSWELL. Well, I could not tell without referring back.

The CHAIRMAN. When did your mother-in-law die?

Mr. COGSWELL. Well, I don't remember the date now.

The CHAIRMAN. What month was it?

Mr. COGSWELL. It was on those papers. You see, it is referring back a good length of time. She died soon after that last letter was written to my wife, who is now dead, else she would appear here at this present time, but she lately died.

The CHAIRMAN. Well, there is a letter here signed by Doctor Richardson, the former superintendent, dated April 3, 1903, stating that Mrs. Hawk had recently had a fall in one of the wards.

Mr. COGSWELL. Yes, sir.

The CHAIRMAN. Did she die shortly after that?

Mr. COGSWELL. Not a very great while after that time.

Mr. SMYSER. What kind of weather was it when she died and was buried?

Mr. COGSWELL. Well, I couldn't exactly tell you about that now. I think it was bad weather, though.

The CHAIRMAN. Was it in the summer time?

Mr. COGSWELL. Yes, sir.

The CHAIRMAN. It was in the summer?

Mr. COGSWELL. It was in the—let me see. I have the burial certificate in my pocket here.

Mr. SMYSER. Well, look at that. That will fix the date. Now, you have something that will fix the date.

The CHAIRMAN. Find out from that.

Mr. COGSWELL. It shows on this certificate—

Mr. SMYSER. Give us the date.

Mr. COGSWELL. Removing remains from hospital—this is signed by Mr. Shippert. This is dated April 15, 1903.

The CHAIRMAN. Have you ever been to the hospital since then?

Mr. COGSWELL. No, sir; not since then.

The CHAIRMAN. That will do, then, sir, because Doctor White was not superintendent during that time.

Mr. COGSWELL. If you will pardon me, I have the names of two persons that know more about this than I do myself.

The CHAIRMAN. Do you mean about the asylum, since Doctor White has been there?

Mr. COGSWELL. Yes, sir; all the time along. The names are Mrs. Lillie Noyal, Capital Heights, Prince George County, Md., on the

way to the Junction—that is, towards Chesapeake Beach. Another is Mrs. Alice Mayer, 207 Linworth place. I saw this lady before I came, and she knows more about this case, because my wife told her, and she went over herself—both of them.

The CHAIRMAN. But she does not know anything about it since Doctor White has been here, since your mother-in-law died, does she?

Mr. COGSWELL. Well, they are prominent people—

Mr. SMYSER. No matter about that.

Mr. COGSWELL. I could not say so, but I just give you their addresses.

The committee (at 3 o'clock p. m.) adjourned until to-morrow, Friday, May 11, 1906, at 10 o'clock a. m.

HOUSE OF REPRESENTATIVES,
Washington, D. C., May 11, 1906, 10 o'clock a. m.

The committee met pursuant to adjournment.

Present: Messrs. Smyser (acting chairman), Barchfeld, Hay, and Wallace.

Also, Dr. William A. White, Stuart McNamara, E. A. Fenning, Richard P. Evans, Hon. Frank Clark, and others.

TESTIMONY OF MRS. DELIA N. SNIDER.

Mrs. DELIA N. SNIDER, being first duly sworn, was examined and testified as follows:

The ACTING CHAIRMAN. Where do you live?

Mrs. SNIDER. No. 7 N street SE.

The ACTING CHAIRMAN. Did you ever visit the hospital for the insane?

Mrs. SNIDER. Yes, sir; I have.

The ACTING CHAIRMAN. How frequently?

Mrs. SNIDER. Once a week.

The ACTING CHAIRMAN. Commencing when?

Mrs. SNIDER. Now, the dates I couldn't tell you.

The ACTING CHAIRMAN. About when?

Mrs. SNIDER. It was last year that I sent my little girl there; but I couldn't tell you the date.

The ACTING CHAIRMAN. You are the wife of the gentleman who was here yesterday?

Mrs. SNIDER. Yes, sir.

The ACTING CHAIRMAN. It was your little girl that was in the hospital?

Mrs. SNIDER. She is not there now.

The ACTING CHAIRMAN. She was there?

Mrs. SNIDER. She was there, I believe, between three and four months.

The ACTING CHAIRMAN. How was the little girl treated while she was there, so far as you observed?

Mrs. SNIDER. So far as my little girl was concerned, I couldn't positively say that I ever saw her illtreated; but there were patients there I have seen.

The ACTING CHAIRMAN. Can you name some of them?

Mrs. SNIDER. I think one of the inmates was a big, stout girl by the name of Schneider, and she taken hold of an old Irish lady.

The ACTING CHAIRMAN. Is Miss Schneider an attendant or a patient?

Mrs. SNIDER. She is a patient.

The ACTING CHAIRMAN. What do you say this Miss Schneider did?

Mrs. SNIDER. I saw her take hold of an old Irish lady, about 80 or 85 years of age, and knock her up against the wall and cut her head. I also saw Senator Daniel's daughter put in a strait-jacket over there.

The ACTING CHAIRMAN. Now, I want to ask you about this attack on the old lady you speak of. Did that attack come on suddenly?

Mrs. SNIDER. I think it was through a temper or a fracas, yes. I think this girl was really very unruly.

The ACTING CHAIRMAN. Do you mean the Schneider girl?

Mrs. SNIDER. Yes; the Schneider girl.

The ACTING CHAIRMAN. Did she injure the old lady?

Mrs. SNIDER. Yes, sir; she threw her down and cut her head and hurt her arm. Her arm was wrapped up in a towel—in a kind of sling for weeks.

The ACTING CHAIRMAN. Was there an attendant there to prevent this?

Mrs. SNIDER. Yes; there were two nurses, as far as I could see; but I really don't think the nurses could attend to all the patients.

The ACTING CHAIRMAN. About this particular case—this was trouble between patients?

Mrs. SNIDER. Well, I saw that.

The ACTING CHAIRMAN. Were there attendants there to prevent it?

Mrs. SNIDER. Yes; they certainly did try to do the best they could.

The ACTING CHAIRMAN. Did they try to interfere to prevent this Miss Schneider from injuring the old lady?

Mrs. SNIDER. Yes; they done all they could.

The ACTING CHAIRMAN. You say Senator Daniel's daughter was there?

Mr. SNIDER. She has been there, and I have seen her put in strait-jackets right there in the room where my little girl was.

The ACTING CHAIRMAN. Did you see them put the jacket on?

Mrs. SNIDER. I certainly did, sir.

The ACTING CHAIRMAN. Why was that done?

Mrs. SNIDER. I believe she got in a temper.

The ACTING CHAIRMAN. Who put the jacket on her?

Mrs. SNIDER. I think the nurse, Miss Herbert, and some of the inmates.

The ACTING CHAIRMAN. Do you know whether it was necessary to put the jacket on her?

Mrs. SNIDER. That I couldn't tell you. I couldn't judge of those things.

The ACTING CHAIRMAN. You saw it done?

Mrs. SNIDER. I saw it done.

The ACTING CHAIRMAN. But perhaps you do not know what it was done for.

Mrs. SNIDER. The only thing I think is that probably the girl was unruly. I don't know about that. I say maybe she was unruly.

The ACTING CHAIRMAN. Did you think it was improper to put that strait-jacket on the young lady?

Mrs. SNIDER. I couldn't judge about that, but I know one thing, that there are patients in that room that are not fit to be in with some patients that are there.

The ACTING CHAIRMAN. Before I leave the matter of Miss Daniel I want to ask if there was anything further about that you can tell us.

Mrs. SNIDER. Only as I say I have seen her time and again put in a strait-jacket.

The ACTING CHAIRMAN. But why it was done and whether it was necessary you don't know?

Mrs. SNIDER. I would not positively say. She may have been unruly. The nurses understood her better than I did. I don't understand those things at all.

The ACTING CHAIRMAN. You think there are patients in there that ought not to have been in there?

Mrs. SNIDER. I certainly do.

The ACTING CHAIRMAN. State briefly why you make that statement.

Mrs. SNIDER. There are a couple of old ladies over there that use the worst and vilest kind of language.

The ACTING CHAIRMAN. Are they crazy?

Mrs. SNIDER. I think so, but I wouldn't say positively. I don't really think they ought to be in with a person that really would have any little sense at all left.

The ACTING CHAIRMAN. You are a refined lady, and you feel that it is shocking to the sensibilities of the patients there who have a sense of refinement left?

Mrs. SNIDER. That is it, sir. That is my feeling toward it, and that is the reason I took my little child away from there.

The ACTING CHAIRMAN. What other acts did you witness there?

Mrs. SNIDER. I witnessed a girl over there, whose name I couldn't positively tell you, fall over onto the porch when I was over there visiting.

The ACTING CHAIRMAN. Of her own accord?

Mrs. SNIDER. Oh, she had a fit, and she lay there helpless.

The ACTING CHAIRMAN. Was she an epileptic?

Mrs. SNIDER. Yes, sir.

The ACTING CHAIRMAN. What else, if anything, did you see?

Mrs. SNIDER. That is as far as I can tell you, only that some clothes of my little girl's had been left over there and my husband wrote for them, and some of them I got and some I didn't. I would take handkerchiefs over and I would take ribbons over, and every time I went there the child was minus these things.

The ACTING CHAIRMAN. You did not see them used by her?

Mrs. SNIDER. No, sir.

The ACTING CHAIRMAN. Did you call the attention of somebody to it?

Mrs. SNIDER. Yes, sir.

The ACTING CHAIRMAN. To whose attention did you call it?

Mrs. SNIDER. To the attention of Miss Herbert.

The ACTING CHAIRMAN. She was an attendant?

Mrs. SNIDER. Yes, sir; and she told me that there were things that went from there to the wash and never came back, not only for my child but for the nurses.

The ACTING CHAIRMAN. Of course having taken things over there for your little girl you felt that she ought to have them, did you not?

Mrs. SNIDER. Yes, sir.

The ACTING CHAIRMAN. That would have ben natural.

Mrs. SNIDER. Yes, sir.

The ACTING CHAIRMAN. Is there anything else that you saw there?

Mrs. SNIDER. I believe that is all I could say.

Mr. WALLACE. You say that you saw no one attempt to help the young lady that fell in a fit?

Mrs. SNIDER. No, sir.

Mr. WALLACE. Nobody came to her relief?

Mrs. SNIDER. I did; I simply did for her what I did for my own poor little girl.

Mr. WALLACE. No one from the hospital came to her relief?

Mrs. SNIDER. No, sir; there were only two nurses at the time, and one of the nurses was chasing a girl over there that had jumped over the railing. I couldn't tell you the girl's name. You know how it is over there; it takes a lot of help. I have not one single thing to say against any of the nurses there at all, so far as my acquaintance with them goes.

TESTIMONY OF F. L. SIDDONS.

F. L. SIDDONS, being first duly sworn, was examined, and testified as follows:

The ACTING CHAIRMAN. Where do you live?

Mr. SIDDONS. At 1914 Biltmore street.

The ACTING CHAIRMAN. What is your business?

Mr. SIDDONS. Lawyer.

The ACTING CHAIRMAN. How long have you lived in this city?

Mr. SIDDONS. Twenty-seven or twenty-eight years.

The ACTING CHAIRMAN. How long have you practiced law?

Mr. SIDDONS. Since 1887.

The ACTING CHAIRMAN. Are you a member of the Bar Association of the District of Columbia?

Mr. SIDDONS. Yes, sir; I am.

The ACTING CHAIRMAN. Are you a member of the Medico-Legal Society?

Mr. SIDDONS. I am not.

The ACTING CHAIRMAN. Mr. Siddons, have you visited St. Elizabeth's Hospital at any time since October 1, 1903?

Mr. SIDDONS. Once.

The ACTING CHAIRMAN. When was that?

Mr. SIDDONS. I think the first visit was in April, but I do not remember the date.

The ACTING CHAIRMAN. Of what year?

Mr. SIDDONS. Of this year.

The ACTING CHAIRMAN. How long were you there?

Mr. SIDDONS. Perhaps half an hour.

The ACTING CHAIRMAN. Did you go through the buildings?

Mr. SIDDONS. No, sir.

The ACTING CHAIRMAN. What did you observe, if anything, in the way of the treatment of the patients?

Mr. SIDDONS. Nothing at all. I did not see any of them.

The ACTING CHAIRMAN. Whom did you go there to see?

Mr. SIDDONS. I went there, as I supposed, to appear before the board of visitors, which was in session on that day.

The ACTING CHAIRMAN. Was the board of visitors in session?

Mr. SIDDONS. It was.

The ACTING CHAIRMAN. What members of the board were there?

Mr. SIDDONS. I am not sure, Mr. Chairman, that I can tell you, but to the best of my recollection there were five or six members of the board present. Judge Maury, the legal member of the board, was absent; and it was explained to me that because of his absence the matter I had appeared there to present would have to go over.

Mr. HAY. When do you say this was?

Mr. SIDDONS. On the first Tuesday in April.

The ACTING CHAIRMAN. Did you make any visit to the institution at all on that occasion?

Mr. SIDDONS. No, sir; I went, under the guidance of one of the attendants, directly to the administration building, and waited there a few moments until Doctor White summoned us into the board room.

The ACTING CHAIRMAN. Have you any personal knowledge as to the management of the hospital during the time I have indicated in a former question, which would aid the committee?

Mr. SIDDONS. Mr. Chairman, before answering that question I would ask leave to make a brief statement as to the occasion of my visit and why I am here to-day. I am here in obedience to a subpoena served upon me at my residence last evening. I was retained some time ago by some of the attendants and nurses, composing an organization called the Nurses and Attendants' Protective Association, or some such title, to advise them as to their rights with respect, first, to the question of the eight-hour law and whether it had application to the employees of that institution. I have no hesitation in saying that, after an investigation of that question, I advised them that I did not consider the eight-hour law did apply. At the same time they also submitted to me the question whether they were entitled to thirty days' annual leave, as the other civil-service employees of the Government are. I took that question up and I advised them. They asked me to present the matter to the superintendent of the asylum and to the board of visitors, and I prepared a brief. They sought an opportunity for my appearance before the board, and on the occasion of my visit I went there prepared to present the claims of these nurses and attendants to the board of visitors for their action; but because of the fact that Judge Maury was absent it was deferred, and the matter is still pending.

Perhaps, in frankness, I ought to say that I had designed that, if my employment had ended, as it would have ended with the appearance before the board of visitors to present certain considerations, this committee which I thought bore upon me, at least, of the aspects of the general situation over there. That grew out of my investigation of this question; but I have some little embarrassment in saying that, because the question is still undisposed of by the board of

visitors. My clients, these nurses and attendants, had been scrupulously anxious that in no way should the rules of the institution or of the Interior Department be in any degree invaded or violated in presenting their claims. They want to do it in an orderly way and within the civil-service rules and regulations. I particularly wish it noted on the record that I am here to-day solely in obedience to the subpoena of the committee and not in any respect at the request of any of those attendants or nurses, who, if I could guess their wishes, would not want me to be here. I am not here voluntarily, but I am here in obedience to the summons.

With that explanation and not speaking in the slightest degree as the representative of any employee of that institution, if the committee wishes me to say anything as the result of my examination into the legal questions I was employed to examine, I should be glad to do so, as I think, perhaps, it has some bearing upon the general question.

The ACTING CHAIRMAN. I take it, from what you have stated, that there were two phases of the matter you were consulted in regard to; first, the application of the eight-hour law to the employees over there.

Mr. SIDDONS. Yes, sir.

The ACTING CHAIRMAN. I understand you to say that, as the result of your investigation, you came to the conclusion and gave it as your opinion that the eight-hour law was not applicable there?

Mr. SIDDONS. I did; that is right.

The ACTING CHAIRMAN. The other matter was as to the thirty days' leave?

Mr. SIDDONS. Yes, sir.

The ACTING CHAIRMAN. You gave it as your opinion that it did not apply?

Mr. SIDDONS. No, sir; that it did apply.

Mr. HAY. You wrote to the chairman of this committee, did you not?

Mr. SIDDONS. Yes, sir.

Mr. HAY. Asking that you be accorded the privilege of appearing before the committee?

Mr. SIDDONS. I do not think the letter states it in exactly that way.

Mr. HAY. I will read it.

I may ask that permission be accorded me to appear before the committee with reference to one aspect, at least, of the management of the hospital.

It was through this communication that you really were asked to appear here.

Mr. SIDDONS. I do not know the occasion of it. I did not know whether there would be public hearings. When that letter was written I expected that my employment for these attendants and nurses would have ceased, as it would have done with the presentation of their claims to the board of visitors; but, as I say, it has been deferred and is still undisposed of. It was not my intention to appear unless my connection with the nurses and attendants had ceased. Then I considered the advisability of appearing before you.

Mr. HAY. I think it would be well for you to give to the committee the aspects of the case to which you refer.

Mr. SIDDONS. I would be very glad to do that, solely as a citizen of the District of Columbia.

Mr. HAY. We understand that.

Mr. SIDDONS. In investigating this question as to whether they were entitled to thirty days' leave I went over, of course, the rules and regulations of the institution governing the employment and pay and leaves of absence of nurses and attendants there. I do not know anything about any other classes of attendants. As the result of that investigation and the inquiries I made, mostly from gentlemen of the organization which employed me, I found out that nurses and attendants were required to work from 12 to 14 hours a day and sometimes longer. They were required to get up at 6 o'clock in the morning and to remain on duty until 10 o'clock at night, except that on alternate evenings they are permitted to go off after the evening meal is finished, which occurs somewhere between five and half past five, and remain away until the hour of retiring, at 10 o'clock in the evening. They are required to work 35 of the Sundays in the year, and they are required to work 5 out of 7 of the legal holidays. To offset, in part, the work they have to do on Sundays and legal holidays they are granted certain half days during the month—four half days or two half days and one whole day, I believe, is the rule—and, as I stated in the brief I submitted, that does not begin to put these people upon the same plane with similar classes of civil-service employees.

The committee should bear in mind that nurses and attendants are classified civil-service employees of the United States Government, and have been since 1896. They are only allowed 15 days continuous leave of absence, which, under the rules and regulations of the institution, will generally be accorded only toward the close of the year. They are not given any leave of absence for sickness. On the contrary, absence on account of sickness is deducted from their leave of absence. The result of all that has been, in my humble judgment, that you have over there an overworked body of men and women. It is work of a singularly irksome and taxing character. One of the results that is attributed to the operation of these rules, as I learn, is that you have a fluctuating and changing body of nurses and attendants. Whether that is true or not I can not say. Doctor White can answer that question better than I can; but I understand that during no one year is the institution able to obtain and retain a class of men and women necessary for the particularly difficult task of looking after the unfortunates there.

Mr. HAY. I suppose that fact could be ascertained from the Civil Service Commission.

Mr. SIDDONS. I suppose it could. I do not know what the practice of the institution may be as to reporting the cause of dismissal or resignations; but I have been very credibly informed that this body of attendants and nurses changes every year in a very marked degree, from 25 to 23 per cent, because for the small pay, \$25 a month, you do not get the class of persons necessary for that work. You get an immature and more or less ignorant class of people; and after they become trained nurses and attendants, they are probably, in most cases, anxious to leave there as soon as they can, so that there is this changing and fluctuating body, which, in my opinion, can not render efficient service to the institution.

The ACTING CHAIRMAN. Did you entertain these views a month ago?

Mr. SIDDONS. Yes, sir.

The ACTING CHAIRMAN. Did you present them to the Appropriations Committee, which made the appropriation for the asylum?

Mr. SIDDONS. No, sir. I wish to say, in that connection, that by the most recent order of the President regarding civil service employees, they are strictly forbidden, upon pain of dismissal, to make any application to Congress for relief in the matter of increase of pay or of hours of service or anything of that kind. All of that must be done, and can only be done, under the order of the President, to the superior officer of the nurses and employees, who are making application for any form of relief.

The ACTING CHAIRMAN. Are you in any manner subject to the civil-service rules?

Mr. SIDDONS. No; I am not. I may say, however, that I was rather active in the civil-service reform movement in past years.

The ACTING CHAIRMAN. I mean now.

Mr. SIDDONS. No; I am not.

The ACTING CHAIRMAN. What I had in mind is this: You gave intelligent consideration to some matters that were submitted to you, and you reached certain conclusions?

Mr. SIDDONS. Yes, sir.

The ACTING CHAIRMAN. I asked you if you entertained these views and if you had appeared before the Appropriations Committee.

Mr. SIDDONS. No, sir; I did not.

The ACTING CHAIRMAN. So that the committee might be advised of the situation there.

Mr. SIDDONS. I could not do so without jeopardizing the interest of those attendants and nurses who had employed me to submit this matter to the superintendent and board of visitors of the institution. If I had appeared for them, it probably would have been grounds for dismissal, under the operation of the recent order of the President on the general subject.

Mr. HAY. Has the board accorded you an opportunity to present this case before them?

Mr. SIDDONS. Only to this extent, that through my clients they themselves suggested that application be made to Doctor White for leave to appear, through me, before the board of visitors to submit these questions, looking toward the relief in the situation; and I believe Doctor White arranged it for the meeting of the board on the first Tuesday of April. When I got there to appear before the board, the presiding officer, whoever he was, wanted to know first whom I represented and how many there were in the organization, and then wanted to know if I had prepared a brief. I said I had. He then informed me that Judge Maury was not there, as I saw, and that they would want to refer the brief to Judge Maury. Since then Judge Maury has seen me and has said that he was going to suggest to Doctor White that Doctor White specify such points in my brief as he did not agree with relating to the general question, and that having thus agreed upon our disagreement it was proposed that at some subsequent meeting of the board we should thrash out the matter of our disagreements. I think I correctly state that matter. That is the way the matter stands to-day.

The ACTING CHAIRMAN. Is the operation of the civil-service law such that an employee, or anybody in employment under the civil service, has his or her mouth padlocked and can not make complaint as to his or her grievance without fear of discharge?

Mr. SIDDONS. I will answer that question in this way. I have no sympathy at all with the last drastic order of the President on that subject. I consider that, to a very considerable degree, civil-service employees under the operation of that order have their mouths padlocked. They may go to their superior officer with their complaint. To illustrate, take the case before you. The nurses and attendants may go to Doctor White or to the board of visitors, and perhaps to the Secretary of the Interior, who has final supervisory power with respect to the institution; but there their efforts must cease. If they come here to complain and ask relief at your hands in the matter of hours or about any such question, it would, under the operation of that order, be cause for "instant dismissal," if I correctly remember the language of the rule.

The ACTING CHAIRMAN. I think, Mr. Siddons, that we are ready to disabuse your mind upon that subject. If there is any employee or any attendant out there who has a well-defined grievance, he has got the right to come before this committee, and he will be protected, civil service or no civil service.

Mr. SIDDONS. I am very glad to hear the chairman say that, but I must repeat that none of my clients have indicated to me any wish to do that. They are content, for the present at least, to have me submit this matter to their immediate superiors in the institution.

The ACTING CHAIRMAN. I believe I voice the sentiments of this committee.

Mr. HAY. Yes; so far as we can protect them. But how can we protect a civil-service employee from an order of the President? I do not see how we can do it.

The ACTING CHAIRMAN. Because the order of the President is subject to the action of Congress.

Mr. HAY. I do not think so.

The ACTING CHAIRMAN. Yes; it can strip him of his civil-service power, and we can rectify it in short order.

Mr. HAY. If we can—

The ACTING CHAIRMAN. If it is operating in that way I, for one, am ready to scalp the institution.

Mr. HAY. So am I, in the way it is carried out.

Mr. SIDDONS. Of course, the order I am referring to is not at all directed to this institution. It is a general civil-service order, applying to all civil-service employees.

Mr. HAY. Is there any other aspect of this investigation to which you wish to refer?

Mr. SIDDONS. No, sir. I do wish to say that I am here in response to your subpoena; I do not wish, either by implication or inference, to have it supposed that I know anything in any way in regard to the charges now being investigated by this committee; nor do my clients in the remotest way, speaking through me or in any other way, join in them. I hope I have made it clear to the chairman of this committee that in no possible way, directly or indirectly, am I here at their suggestion, cooperation, or request in any form.

The ACTING CHAIRMAN. You are here because you had to be here.

Mr. SIDDONS. I am here because I had to be here.

TESTIMONY OF LEWIS TAYLOR.

LEWIS TAYLOR, being first duly sworn, was examined, and testified as follows:

The ACTING CHAIRMAN. Where do you live?

Mr. TAYLOR. I live at Anacostia, D. C.

The ACTING CHAIRMAN. Are you employed at St. Elizabeth's Hospital?

Mr. TAYLOR. Yes, sir.

The ACTING CHAIRMAN. When did you go there to work?

Mr. TAYLOR. I went there January the 2d, 1903.

The ACTING CHAIRMAN. Have you been there ever since, and are you there now?

Mr. TAYLOR. Yes, sir.

The ACTING CHAIRMAN. Where were you employed?

Mr. TAYLOR. In the basement in the laundry.

The ACTING CHAIRMAN. Who is your foreman?

Mr. TAYLOR. Mr. Maenche.

The ACTING CHAIRMAN. Has he been the foreman there ever since you have been there?

Mr. TAYLOR. Yes, sir.

The ACTING CHAIRMAN. When did you know that you were to appear before this committee?

Mr. TAYLOR. I did not know it until this morning, when the man brought the notice.

The ACTING CHAIRMAN. Did you talk with anybody about what you were going to say here before you came here?

Mr. TAYLOR. No, sir.

The ACTING CHAIRMAN. Did you talk with Maenche?

Mr. TAYLOR. No, sir; I always said I would tell the truth. He never had anything to say to me.

The ACTING CHAIRMAN. What do you know, and what have you seen out there, if anything, in the way of mistreatment of patients?

Mr. TAYLOR. I have seen several patients mistreated in the laundry.

The ACTING CHAIRMAN. Who were they?

Mr. TAYLOR. One was a patient by the name of Mike Liston. I think that was his name. He doesn't work in the laundry now.

The ACTING CHAIRMAN. When did he work there?

Mr. TAYLOR. About a year ago, I think, he stopped working there.

The ACTING CHAIRMAN. How was he mistreated?

Mr. TAYLOR. He was mistreated by getting cut over the shoulder with a wet towel.

The ACTING CHAIRMAN. Who did it?

Mr. TAYLOR. Harry Satterfield.

The ACTING CHAIRMAN. What for?

Mr. TAYLOR. Well, he got off one day and he talked kind of loud, and Harry didn't seem to like it; so he taken the towel and cut him over the shoulder.

The ACTING CHAIRMAN. A wet towel?

Mr. TAYLOR. Yes, sir.

The ACTING CHAIRMAN. Did he have his clothes on?

Mr. TAYLOR. Yes, sir; he had his working clothes on.

The ACTING CHAIRMAN. How did he cut him over the shoulder? You mean that he hit him?

Mr. TAYLOR. Yes, sir; he took a towel and rapped him over the shoulder.

The ACTING CHAIRMAN. Were the blows hard?

Mr. TAYLOR. I guess about as hard as you could put them down—the same as you would whip a child.

The ACTING CHAIRMAN. What effect did that have on Linden?

Mr. TAYLOR. I don't know that it had very much effect. He cut him and told him to hush.

The ACTING CHAIRMAN. When you say "cut him," you mean that he hit him?

Mr. TAYLOR. I mean hit him. I mean he rapped him over the shoulder with a towel.

The ACTING CHAIRMAN. Do you know whether it hurt him particularly?

Mr. TAYLOR. I didn't notice that it hurt him particularly; no, sir. He continued to work.

The ACTING CHAIRMAN. Did you notice anything more than that one occasion, between Satterfield and Linden?

Mr. TAYLOR. Yes, sir.

The ACTING CHAIRMAN. You say you did see it more than once?

Mr. TAYLOR. Well, he had been teasing him on several occasions. He shoved him around; but I don't know whether he really meant to hurt him.

The ACTING CHAIRMAN. Was it done in a playful manner or in an ugly manner?

Mr. TAYLOR. Well, I think he always meant to play with him. He seemed to shove him around, and he would get off and holler and swear and one thing and another. He would tease him.

The ACTING CHAIRMAN. Did Satterfield tease him?

Mr. TAYLOR. I believe he did. He would get after him, and then he would get off and swear back at Satterfield.

The ACTING CHAIRMAN. Did you ever see any other patient mistreated there?

Mr. TAYLOR. Yes, sir; I seen a fellow by the name of Gregory mistreated there. I think his name was Billy Gregory.

The ACTING CHAIRMAN. Who mistreated him?

Mr. TAYLOR. An employee in the laundry by the name of Allen Baldwin.

The ACTING CHAIRMAN. What did he do to Gregory?

Mr. TAYLOR. He teased Gregory until he got off, and then Gregory kicked him and knocked him up against the wall, so then he took his fist and struck Gregory on the side of the head.

The ACTING CHAIRMAN. Did he tease him to drive Gregory to do that?

Mr. TAYLOR. Yes, sir; I was standing right there.

The ACTING CHAIRMAN. And Gregory hit him?

Mr. TAYLOR. Yes, sir.

The ACTING CHAIRMAN. With his closed fist or his open hand?

Mr. TAYLOR. He hit him with his closed fist and kicked at him, but he kicked the side of the wall instead of kicking Baldwin.

The ACTING CHAIRMAN. Did Baldwin knock him down?

Mr. TAYLOR. Yes; Allen knocked Gregory down.

The ACTING CHAIRMAN. Where did he hit him?

Mr. TAYLOR. He hit him on the side of the head.

The ACTING CHAIRMAN. Did you ever report that to anybody?

Mr. TAYLOR. No, sir.

The ACTING CHAIRMAN. Why didn't you?

Mr. TAYLOR. Well, there was a foreman there and he never paid any attention to what I said. I reported several incidents to him.

The ACTING CHAIRMAN. Was that Maenche?

Mr. TAYLOR. Yes, sir; he never paid any attention. He always tried to ignore everything I would bring up.

The ACTING CHAIRMAN. So you quit?

Mr. TAYLOR. Yes, sir.

The ACTING CHAIRMAN. Were there any other incidents of that kind?

Mr. TAYLOR. No, sir; I don't remember seeing any other patients abused.

The ACTING CHAIRMAN. Did you see any other instances of that kind? If you did, tell us about it.

Mr. TAYLOR. Well, I don't remember any other instance of that kind since I have been there. Of course I couldn't tell what I have heard. I have to state about what I seen.

The ACTING CHAIRMAN. Did you and Maenche take a little nip out there together occasionally?

Mr. TAYLOR. No, indeed; not me and Maenche.

The ACTING CHAIRMAN. Does Maenche?

Mr. TAYLOR. Well, I have never seen Maenche drink, but I have seen him drunk on duty.

The ACTING CHAIRMAN. Did you report that?

Mr. TAYLOR. I didn't report it to Doctor White.

The ACTING CHAIRMAN. How often did you see that?

Mr. TAYLOR. Well, I seen him drunk twice, at least.

The ACTING CHAIRMAN. That was in the daytime, was it?

Mr. TAYLOR. Yes, sir; during working hours—during the eight hours that we worked.

The ACTING CHAIRMAN. Was he fit to attend to his duty?

Mr. TAYLOR. On the two instances that I remember. On one he was in the room in the basement. I was taking medicine in the meantime, and I had to take medicine, I believe every two hours. About the middle of the day—I think it was about 11 o'clock, I went down there and I was surprised to see him down there sitting back in the dark room, and the room smelled like whisky itself. On another occasion, it was in 1904, the 23d of February, he was so bad off that he couldn't do anything at all. He just sat around the dry room drawed all up so [indicating], just in a critical condition, and his friend then, Mr. McMurray, he tried to get him to go off and hide, but he hung around until after dinner and then he disappeared. I don't know where he went to.

The ACTING CHAIRMAN. He and McMurray were friendly then?

Mr. TAYLOR. Yes, sir; they were very, very friendly then.

The ACTING CHAIRMAN. They have had a little falling out since that time, have they?

Mr. TAYLOR. Well, they have had a falling out since.

The ACTING CHAIRMAN. That was a continuation of Washington's Birthday celebration?

Mr. TAYLOR. Yes, sir; in 1904.

The ACTING CHAIRMAN. Was there any other time that you saw him when you thought he was under the influence of liquor?

Mr. TAYLOR. I have never seen him so bad off. Those were the only two times I have seen him so bad off.

The ACTING CHAIRMAN. Were there other times when you were satisfied that Maenche had been drinking?

Mr. TAYLOR. I smelled whisky on him at other times, but he has never been so bad off. I never see him so bad off at other times.

The ACTING CHAIRMAN. You know what whisky smells like?

Mr. TAYLOR. Yes, sir; I know what it smells like.

Mr. BARCHFELD. Is Satterfield still in the laundry?

Mr. TAYLOR. No, sir; he was dismissed.

Mr. BARCHFELD. Do you know when?

Mr. TAYLOR. He was dismissed last month; I think it was about the last of March.

Mr. BARCHFELD. Do you what he was dismissed for?

Mr. TAYLOR. He was dismissed for abusing patients.

Mr. BARCHFELD. Do the attendants over there know, at this particular time, what Mr. Satterfield was removed for?

Mr. TAYLOR. I don't know whether everyone in the institution knows it.

Mr. BARCHFELD. I mean the help.

Mr. TAYLOR. In the laundry they all know it.

The ACTING CHAIRMAN. Is Baldwin there yet?

Mr. TAYLOR. No, sir; Baldwin was discharged or resigned in March, I think it was.

The ACTING CHAIRMAN. Do you know what he was discharged for?

Mr. TAYLOR. He handed in his resignation, and in the meantime he did something. I think he knocked over a water cooler, and then he had to go before the time expired.

The ACTING CHAIRMAN. He is not there now?

Mr. TAYLOR. No, sir; he is not there now.

At this point Mr. Olcott resumed the chair.

TESTIMONY OF SAMUEL E. LACY.

SAMUEL E. LACY, being duly sworn, was examined and testified as follows:

The CHAIRMAN. What is your full name?

Mr. LACY. Samuel E. Lacy.

The CHAIRMAN. Where do you reside?

Mr. LACY. I reside at 1732 Tenth street NW.

The CHAIRMAN. What is your occupation?

Mr. LACY. I am a notary public with an office at 609 F street.

The CHAIRMAN. Did you ever visit St. Elizabeth's?

Mr. LACY. Yes, sir; I have visited there probably a dozen times between October, 1903, and May, 1904.

The CHAIRMAN. What did you go there for?

Mr. LACY. I went there in company with Mr. Robert T. Douglass to see a patient, a friend of both of us.

The CHAIRMAN. What was the name of the patient?

Mr. LACY. Samuel A. Tyler. We called him Sampson Tyler.

The CHAIRMAN. Did you ever see anything in the way of cruelty to patients there?

Mr. LACY. I have never seen anything; but on the occasion especially, we had been over there, Mr. Douglass and myself, to see Sampson and he was apparently in good physical shape; then in three or four days after that we went back to visit him and found him in pretty bad shape. He had both of his eyes blacked and his lip was cut and his ear was bruised and on one of his wrists there was a bandage. I don't remember which it was he had bandaged.

The CHAIRMAN. Do you know what was the matter with his wrist?

Mr. LACY. No, sir; I didn't see it.

The CHAIRMAN. What was the matter with Tyler; was he an epileptic?

Mr. LACY. No; he was not an epileptic. He lost his mind and was committed there.

The CHAIRMAN. He was committed by court proceedings, I suppose?

Mr. LACY. I think so.

The CHAIRMAN. Did you have anything to do with that?

Mr. LACY. No; not at all.

The CHAIRMAN. He was put in by his family?

Mr. LACY. No; I think he was put in there by the police, but I am not sure.

The CHAIRMAN. Do you know how Tyler got those black eyes?

Mr. LACY. No; when I asked him—I don't recall which of us asked him.

The CHAIRMAN. What did he say?

Mr. LACY. He says: "Hush, hush; that's all right." That's all the answer we could get from him.

The CHAIRMAN. So you don't know how he got them?

Mr. LACY. No.

The CHAIRMAN. He did not tell you and nobody else told you?

Mr. LACY. No.

The CHAIRMAN. Did you speak to any of the attendants about how he got them?

Mr. LACY. No.

The CHAIRMAN. Do you know who the attendant was?

Mr. LACY. No; I didn't know any of them.

The CHAIRMAN. Was Tyler one of the patients that did work in the hospital?

Mr. LACY. Not at that time. I don't think I have been over there to that place for a year and a half.

The CHAIRMAN. Is Tyler there now?

Mr. LACY. Yes, sir.

The CHAIRMAN. Do you go to visit him now?

Mr. LACY. No; I don't visit him now. I used to go over there and went for probably four or five months; but since that I have not gone. I have only inquired after him through Mr. Douglass, who does go. I hear from him in that way.

The CHAIRMAN. Did you visit him when Doctor White was superintendent?

Mr. LACY. I don't know whether he was there, but I know it was between the period of September, 1903, and May, 1904.

The CHAIRMAN. When was it you visited him and found him in this condition; was it when he first went there, or was it afterwards?

Mr. LACY. No; he had been there some time. It was toward the last of my visits to him. It was probably in April or May, 1904.

The CHAIRMAN. It was not just after he went there?

Mr. LACY. No, sir.

The CHAIRMAN. Have you ever told anybody connected with the hospital about the condition he was in?

Mr. LACY. No, sir; I did not.

The CHAIRMAN. So you don't know how he received his injuries?

Mr. LACY. I have no knowledge how he received them. I didn't ask any one at all except him. I tried to find out from him.

The CHAIRMAN. And he did not tell you, or could not tell you?

Mr. LACY. He did not tell me.

The CHAIRMAN. Do you know whether he was ever violent, or did you ever see him violent?

Mr. LACY. No; I always had pleasant, quiet talks with him. He was not even loud in the time I saw him.

The CHAIRMAN. How did the attendants act when you went there; did they treat you civilly and nicely?

Mr. LACY. Yes, sir; they treated me civilly.

The CHAIRMAN. Did you ever see anybody else injured in the hospital?

Mr. LACY. No, sir.

The CHAIRMAN. Do you know in what ward he was?

Mr. LACEY. No, sir; I don't know. Mr. Douglass was usually the one that went to the front, because he knew more about it than I did. Tyler was an employee of Mr. Douglass and he knew about him at the time he was committed there, I suppose, up to the present time. We used to drive over there and he led the way. I merely followed.

The CHAIRMAN. Was Tyler a colored man?

Mr. LACY. Yes, sir.

TESTIMONY OF ROBERT T. DOUGLASS.

ROBERT T. DOUGLASS, being duly sworn, was examined and testified as follows:

The CHAIRMAN. What is your full name?

Mr. DOUGLASS. Robert T. Douglass.

The CHAIRMAN. Do you reside here in the city of Washington?

Mr. DOUGLASS. I do.

The CHAIRMAN. Whereabouts?

Mr. DOUGLASS. 1533 Fourteenth street NW.

The CHAIRMAN. What is your occupation?

Mr. DOUGLASS. I am, just at the present time, furloughed. I have been on the temporary roll in the assessor's office. At this time I have been furloughed. I have been, though, engaged in the cleaning and dyeing business with my father.

The CHAIRMAN. When you say the assessor's office, you mean the assessor's office of the District of Columbia?

Mr. DOUGLASS. Yes, sir.

The CHAIRMAN. Did you ever visit the hospital?

Mr. DOUGLASS. I have.

The CHAIRMAN. When? Between what periods?

Mr. DOUGLASS. Well, I have visited from August—it will be three years this coming August, was the first time I went there, I think.

The CHAIRMAN. Do you visit there now, quite frequently?

Mr. DOUGLASS. I was there last Tuesday.

The CHAIRMAN. Last Tuesday?

Mr. DOUGLASS. Yes.

The CHAIRMAN. Did you go there to see this Tyler, who has been spoken of?

Mr. DOUGLASS. Yes, sir; I went to see Tyler.

The CHAIRMAN. Did you ever see any evidences of cruelty on the part of any of the attendants toward patients, especially toward Tyler?

Mr. DOUGLASS. I have seen evidences of cruelty, as I thought, but I have never seen any attendants do anything. I have seen what I judged was the result of it.

The CHAIRMAN. What was it that you saw?

Mr. DOUGLASS. I have seen Tyler with his eyes blackened. I have gone there, and his eyes were all bloodshot, and I asked him how it came about, and he said he had been beat over the head with a bag, or something.

The CHAIRMAN. With a bag?

Mr. DOUGLASS. Some kind of a bag, or something.

The CHAIRMAN. Did he tell you who did it?

Mr. DOUGLASS. The attendant, he told me, did it.

The CHAIRMAN. Do you know what the attendant's name was?

Mr. DOUGLASS. I know one particular attendant's name that he claimed beat him whenever he got an opportunity. His name was Brown. He is now, I think, a member of the Metropolitan Police force. He is not at the asylum any longer.

The CHAIRMAN. Do you know what his first name is?

Mr. DOUGLASS. I can't say just what his first name was. I knew his name was Brown, and that is all; and he is on the police force now.

The CHAIRMAN. Do you know when he left the asylum?

Mr. DOUGLASS. Well, probably after Tyler had been there a year; maybe less, or maybe a little longer. I could not tell positively about that.

The CHAIRMAN. When did you say Mr. Tyler went there?

Mr. DOUGLASS. Tyler went there in August, 1903. He was working for me at the time, and I went along with his wife to Officer Frank and had him committed. That is, he was arrested and carried to the hospital here at the jail, the Washington asylum, and Officer Frank—I received word to go down there, and I went down there, and he asked us something about his actions, etc.

The CHAIRMAN. Is Tyler one of the patients that did not work in the asylum?

Mr. DOUGLASS. I never knew of his doing any work.

The CHAIRMAN. Did you ever see Tyler at any other time when he looked as if he had been injured?

Mr. DOUGLASS. I visited Tyler, I suppose, once a week for a year, right straight along, on an average. I saw him on a number of times when he was bruised up. He had a bad ear on him one time, and I asked him how it came about. He said he had been struck. I asked Doctor Toner about it one time, and Doctor Toner stated that

it was an insane ear; but it was black and blue. I thought, when I spoke to him at the time, that I couldn't understand it being black and blue. It might be an insane ear, and it might be swollen and all that, but I couldn't understand the discoloration.

The CHAIRMAN. Did you ever complain to anybody else about it?

Mr. DOUGLASS. I used to speak to the attendants there sometimes, but I could never get any satisfaction from them; whenever I went there and there was anything new that I saw—that he had been hurt in any way—I would ask him about it, and he would tell me. He was perfectly able to tell what happened to him. He knew. He was in such a condition, in fact, at one time, that they were thinking of allowing him to go out. I think the fact that they didn't let him go out caused him to have a setback. He expected to get out, and was disappointed.

The CHAIRMAN. When did you last see him?

Mr. DOUGLASS. Last Tuesday.

The CHAIRMAN. What was his condition then?

Mr. DOUGLASS. Well, he is in pretty bad condition now. He doesn't seem to know very much. He knew me and called my name. I had my wife and child with me. He spoke to them, and called me by name, etc.; but he doesn't seem to have very much to say. He seems to be, in a way, losing his speech. His speech is defective in some way.

The CHAIRMAN. Did you ever see any of the attendants abuse anybody else?

Mr. DOUGLASS. No, sir; I never saw them abuse anyone.

The CHAIRMAN. When you went there did the attendants treat you properly?

Mr. DOUGLASS. Yes, sir. I never had any fault to find. Whenever I went there, as a rule, I went to see Mr. Patrick Doody. He was a supervisor, and always accorded me every privilege that they allow, I believe. I am not here voluntarily in this matter. I don't know who sent my name in. I suppose it is simply the result of my speaking at one time about the treatment I knew Tyler was getting. I was surprised when I received the summons.

Mr. HAY. Do you know how Tyler was put in the asylum?

Mr. DOUGLASS. Yes, sir. How he was put in?

Mr. HAY. Yes; how he first got there.

Mr. DOUGLASS. He was first arrested, and after being arrested they sent him to the Washington Asylum; and from there they sent him over to St. Elizabeth's.

Mr. HAY. Did they send him there after he had been adjudged insane by the court?

Mr. DOUGLASS. No; when his trial came up in court I was summoned as a witness.

Mr. HAY. In court?

Mr. DOUGLASS. Yes, sir. He had been in the institution, I judge, possibly a month or a month and a half; maybe two months, at that time.

Mr. HAY. Before he was adjudged insane?

Mr. DOUGLASS. Yes, sir; and Dr. Toner testified at the trial that he was both physically and mentally unfit to appear. So he was not in court.

TESTIMONY OF ALEXANDER ROSS.

ALEXANDER ROSS, being duly sworn, was examined and testified as follows:

The CHAIRMAN. What is your full name?

Mr. Ross. Alexander Ross.

The CHAIRMAN. Where do you reside?

Mr. Ross. I reside at No. 1000 Seventh street southwest.

The CHAIRMAN. Have you ever visited the asylum?

Mr. Ross. Yes. Last summer I went down every week. Last year, from February to September—

The CHAIRMAN. Wait a moment, please. Did you say your name was Alexander Ross?

Mr. Ross. Alexander Ross; yes.

The CHAIRMAN. Alexander Wilson Ross, is it?

Mr. Ross. No, no Wilson. That is all the name; and it is plenty, too.

The CHAIRMAN. Why did you visit the asylum?

Mr. Ross. To see a friend of mine, a patient there.

The CHAIRMAN. Who was your friend?

Mr. Ross. Joseph Kinsey.

The CHAIRMAN. Did you ever see any evidences of any bad treatment of patients there?

Mr. Ross. I did, to one patient.

The CHAIRMAN. Who was the patient?

Mr. Ross. His name was Dodge. He was a fireman.

The CHAIRMAN. What did you see in connection with him?

Mr. Ross. He was sitting in a little partitioned-off little room there waiting for to see Kinsey. They were bringing in Kinsey, and Dodge came in and told us his name and wanted to tell me something. One of them attendants came in and grabbed him and said: "You get out of here." Dodge, he wrestled with him. He didn't want to go out. He wanted to tell me something. So they commenced to struggle, and finally the attendant struck him and knocked Dodge. He hit him heavy. He staggered him. He was a big man, too, Dodge was; and Dodge he commenced to cry. It was a bad place.

The CHAIRMAN. What was the name of the attendant who struck Dodge?

Mr. Ross. It was something—now, I couldn't tell. It ended with a "t-o-n" of some kind.

The CHAIRMAN. It ended how?

Mr. Ross. With a "ton"—Hamilton, or Webberton, or something like that. I don't remember.

The CHAIRMAN. When was this?

Mr. Ross. Last June; last year.

The CHAIRMAN. What ward was it; do you know?

Mr. Ross. I think that was what they called Oak Ward. I am not sure, though.

The CHAIRMAN. Was it the same ward where Kinsey was?

Mr. Ross. Yes, sir; the same ward Kinsey was in.

The CHAIRMAN. Did you ever make any complaint about that to anybody there?

Mr. Ross. No; I did not. I seen it was no use. I used to talk about it to everybody that knew Dodge, that that was bad treatment. Finally Dodge was killed. They killed him down there.

The CHAIRMAN. When did Dodge die; do you know?

Mr. Ross. I forget now. It was sometime after that Dodge died. He was a fireman in the city here; one of the city firemen. He died there, anyway. After this fellow struck him he came in to me and showed me his arm. He had it bandaged. He said Dodge injured him the day before in his arm, and he wasn't going to stand it any longer.

The CHAIRMAN. You mean the attendant said that Dodge had injured him?

Mr. Ross. Injured him; cut his arm up.

The CHAIRMAN. What was the attendant who showed you that?

Mr. Ross. The attendant.

The CHAIRMAN. He said Dodge injured him, and he was not going to stand it any longer.

Mr. Ross. Yes.

The CHAIRMAN. How did the attendant's arm look?

Mr. Ross. Oh, I couldn't tell. There was a rag all around it, a piece of calico.

The CHAIRMAN. Was Dodge a big, strong man?

Mr. Ross. Yes; Dodge was a big, strong man, as big as the attendant.

The CHAIRMAN. As big as the attendant?

Mr. Ross. Yes; they were both big men.

The CHAIRMAN. Was Dodge apparently a strong man?

Mr. Ross. Yes, sir.

The CHAIRMAN. Did he hit the attendant too at that time?

Mr. Ross. No; Dodge didn't hit him.

The CHAIRMAN. Did he resist?

Mr. Ross. Yes; he resisted. He didn't want to leave the room. He wanted to tell me something about his wife; to take some news to his wife.

Mr. HAY. How old a man was he?

Mr. Ross. He looked to be a man over 40.

The CHAIRMAN. Was this tussle between the attendant and Dodge a regular scrap—a fight?

Mr. Ross. Yes; a regular fight, only Dodge didn't fight. He didn't want to leave the room. He backed up against the wall and tried to hold on by that.

The CHAIRMAN. Where did the attendant hit him?

Mr. Ross. He hit him in different places. He hit him in the face one time, and hit him in the breast. But Dodge got licked, and he cried and that was the end of it. He said he was bad used, bad used; that they wanted to kill him. He got him outside, of course.

Mr. WALLACE. He said he was "bad used" at that particular time?

Mr. Ross. Yes; bad used, bad used, and he wanted to kill him.

The CHAIRMAN. I guess that will do, unless Mr. Wallace would like to ask further questions.

Mr. WALLACE. I would like to ask another question. Did he say that bad treatment was general?

Mr. Ross. Well, I think it was. Because I will tell you another

instance. We went down to see this Kinsey, and he says to us, "Well, you had better not see him now, because he is always washed Saturdays. Come to see him some other time." So we went away satisfied with that, and went back again. We were told the same story, "Better not see him." "Well," says I, "I demand it." He says "Well, if you demand it"—that was a man by the name of Floyd or Lloyd, a nurse, because he had a white jacket. We found Kinsey with two ribs broken and a black eye. So we couldn't get no sense out of Kinsey how that was done. He couldn't tell us; but that is the way he was. He had a plaster all up his side and his eye was blacked.

The CHAIRMAN. Did Kinsey tell you how he was hurt?

Mr. ROSS. No; oh, Kinsey was a real crazy man, you know. You couldn't get head or tail out of anything he said. There was a fellow hit Kinsey on the head, and that cured him. He got sane right away.

The CHAIRMAN. What is that?

Mr. ROSS. It cured him. He came to his senses.

The CHAIRMAN. Who hit him on the head and cured him?

Mr. ROSS. Oh, I don't know.

The CHAIRMAN. Was it a patient or an attendant?

Mr. ROSS. A patient, I believe.

The CHAIRMAN. A patient?

Mr. ROSS. Yes.

The committee (at 11.20 o'clock a. m.) went into executive session, and at 11.50 a. m. resumed its open session.

The CHAIRMAN. Doctor White, have you a list of witnesses that you want called in this matter?

Doctor WHITE. I have a number of witnesses whose names I have jotted down as we have gone along.

The CHAIRMAN. If you will give us a list of the witnesses we will have them here after we have finished with those whose names are now on the list.

Doctor WHITE. They are in the city; I can get them in twenty-four hours.

The CHAIRMAN. That will be time enough. Mr. Evans has some witnesses he would like to have examined.

Mr. HAY. When can you have them here, Mr. Evans?

Mr. EVANS. I think most of them could be gotten by to-morrow morning, probably.

Mr. HAY. All right.

The CHAIRMAN. Are you going to be here to-morrow, Doctor?

Mr. BARCHFELD. Yes, sir.

The CHAIRMAN. Are you, Mr. Wallace?

Mr. WALLACE. Yes, sir; I think so.

The CHAIRMAN. I will be unable to be here to-morrow.

Mr. HAY. I think we might have a session to-morrow morning.

Mr. EVANS. When you adjourn to-morrow, are you going to adjourn until Tuesday? I would like to get some witnesses who are out of the city, and I think I can get them here by that time.

The CHAIRMAN. I think we will have to adjourn over Monday. Monday is District day, and I will have to be present in the House all day.

Mr. SMYER. Will you have a session to-morrow?

The CHAIRMAN. Mr. Hay suggests that we have a session. Are you going to be here to-morrow?

Mr. SMYSER. Yes, sir.

The CHAIRMAN. Then there is no reason why you should not have a session.

Mr. HAY. I want to get through with this.

Mr. EVANS. I could finish up all of my witnesses on Tuesday if it would be more convenient for the committee.

Mr. SMYSER. Can we not arrange to put in a couple of hours to-morrow?

Mr. EVANS. There will be enough city witnesses here to take you all day to-morrow, if you want to go on.

Mr. HAY. We want to go on.

The CHAIRMAN. All right; you will go on then to-morrow at 10 o'clock.

The committee (at 12 o'clock m.) adjourned until to-morrow, Saturday, May 12, 1906, at 10 o'clock a. m.

HOUSE OF REPRESENTATIVES,
Washington, D. C., May 12, 1906—10 o'clock, a. m.

The committee met pursuant to adjournment.

Present: Messrs. Smyser (acting chairman), Barchfeld, Hay, and Wallace; also, Dr. William A. White, Stuart McNamara, Richard P. Evans, Hon. Frank Clark, and others.

TESTIMONY OF JAMES ALBERT OGDEN.

JAMES ALBERT OGDEN, being duly sworn, was examined, and testified as follows:

The ACTING CHAIRMAN. What is your name?

Mr. OGDEN. James Albert Ogden.

The ACTING CHAIRMAN. Where do you live?

Mr. OGDEN. I live at 251 N street northwest.

The ACTING CHAIRMAN. Are you an employee out at the asylum?

Mr. OGDEN. Not at the present time.

The ACTING CHAIRMAN. Have you been?

Mr. OGDEN. Yes, sir.

The ACTING CHAIRMAN. When were you employed there?

Mr. OGDEN. I was employed there—I think it was last August I left there.

The ACTING CHAIRMAN. Of last year?

Mr. OGDEN. Yes, sir.

The ACTING CHAIRMAN. How long had you been there?

Mr. OGDEN. Well, about three years, more or less; somewhere along there.

The ACTING CHAIRMAN. Were you there when Doctor White took charge of the institution?

Mr. OGDEN. Yes, sir.

The ACTING CHAIRMAN. Where were you employed during that time?

Mr. OGDEN. I think I was an attendant on Dawes first; that building in that department.

The ACTING CHAIRMAN. I mean going the other way. I ask you to go the other way in your employment, for this reason, that we do not care to cover the period of Doctor Richardson's or Doctor Godding's administration. You understand my question now?

Mr. OGDEN. Yes, sir.

The ACTING CHAIRMAN. During the time Doctor White was superintendent, when you were there, where were you employed?

Mr. OGDEN. I was in Howard Hall department, sir.

The ACTING CHAIRMAN. How many patients were in there?

Mr. OGDEN. I guess about 160 or 170; something like that.

The ACTING CHAIRMAN. How many attendants did you have?

Mr. OGDEN. There was 2 attendants to each ward. It run from about 18 to 23 men on a ward—some of them only about 15.

The ACTING CHAIRMAN. You mean there were two attendants in the ward you had?

Mr. OGDEN. Yes, sir.

The ACTING CHAIRMAN. Who was the other attendant?

Mr. OGDEN. A man by the name of Browning, part of the time. At the time I left there it was R. L. Browning.

The ACTING CHAIRMAN. Is he there yet, do you know?

Mr. OGDEN. Yes, sir.

The ACTING CHAIRMAN. What did you see, if anything, by way of mistreatment of patients while you were there?

Mr. OGDEN. Well, sir, I never seen any mistreatment, as far as I know of.

The ACTING CHAIRMAN. Any striking or knocking down of patients by attendants?

Mr. OGDEN. No, sir; we never had any trouble, only trouble in handling them a little rough sometimes; but we never struck them or anything like that.

The ACTING CHAIRMAN. Did you ever witness anything of the kind?

Mr. OGDEN. No, sir.

The ACTING CHAIRMAN. Any knocking down of patients by attendants?

Mr. OGDEN. No, sir.

The ACTING CHAIRMAN. In handling them—what did you endeavor to do by way of handling the patients?

Mr. OGDEN. We have sometimes—you know, you would have to handle them the best way you could. If you was alone, of course, and a man jumped on you, you had to handle him the best you could. Sometimes you had to handle them a little rough, throw them down, or something like that, you know, probably a little hard. We was always very careful, everybody I ever saw was just as careful as they possibly could be.

The ACTING CHAIRMAN. Did you do that yourself?

Mr. OGDEN. I have had to do it; yes, sir.

The ACTING CHAIRMAN. Did you do it purposely?

Mr. OGDEN. No, sir.

The ACTING CHAIRMAN. I mean for the purpose of injuring the patient?

Mr. OGDEN. No, sir.

The ACTING CHAIRMAN. Or of inflicting pain?

Mr. OGDEN. No, sir.

The ACTING CHAIRMAN. Did you ever see any other attendants do it for that purpose?

Mr. OGDEN. No, sir.

The ACTING CHAIRMAN. Or any way that seemed to you to be abuse of the patients?

Mr. OGDEN. No, sir; they always appeared to handle them just as carefully as they possibly could, sir.

The ACTING CHAIRMAN. You are not there now?

Mr. OGDEN. No, sir.

Mr. HAY. What do you know about the food out there?

Mr. OGDEN. Well, I don't know anything. The food was all right, as far as I saw, sir.

Mr. HAY. It was?

Mr. OGDEN. Yes, sir.

Mr. HAY. How long do you say you were there, under Doctor White?

Mr. OGDEN. I was there about three different times—about nine years, probably, altogether; probably more.

Mr. HAY. How long under Doctor White? How long have you been away from there?

Mr. OGDEN. Since August—since August last.

Mr. HAY. Did you resign?

Mr. OGDEN. No, sir.

Mr. HAY. Were you discharged?

Mr. OGDEN. Well, I was put off, you know, in a way.

TESTIMONY OF MRS. WINNIE FRAZIER.

Mrs. WINNIE FRAZIER, being duly sworn, was examined, and testified as follows:

The ACTING CHAIRMAN. Are you employed out at the hospital?

Mrs. FRAZIER. Yes, sir.

The ACTING CHAIRMAN. How long have you been there?

Mrs. FRAZIER. Well, this last time I guess I have been there about ten years—nine or ten years.

The ACTING CHAIRMAN. Were you there when Doctor White took charge of the institution?

Mrs. FRAZIER. Yes, sir.

The ACTING CHAIRMAN. Have you been there ever since?

Mrs. FRAZIER. Ever since.

The ACTING CHAIRMAN. Whereabouts are you employed there?

Mrs. FRAZIER. In the laundry.

The ACTING CHAIRMAN. Have you been there during all this time? I mean, since Doctor White has been superintendent.

Mrs. FRAZIER. I left there, and stayed away three months, and went back again.

The ACTING CHAIRMAN. I mean when you were employed in the laundry.

Mrs. FRAZIER. Yes, sir; in the laundry all the time.

The ACTING CHAIRMAN. Who was your superintendent?

Mrs. FRAZIER. In the laundry?

The ACTING CHAIRMAN. Yes.

Mrs. FRAZIER. Mr. Maenche.

The ACTING CHAIRMAN. You have known him all these years?

Mrs. FRAZIER. I have known him six years.

The ACTING CHAIRMAN. What do you know about him drinking?

Mrs. FRAZIER. I know nothing about it at all.

The ACTING CHAIRMAN. Did you ever see him drunk or when you thought he was under the influence of liquor?

Mrs. FRAZIER. No, sir; I never have.

The ACTING CHAIRMAN. How frequently would you see him out there, for the last year or two?

Mrs. FRAZIER. I seen him every day.

The ACTING CHAIRMAN. More than once a day?

Mrs. FRAZIER. Three or four times a day.

The ACTING CHAIRMAN. And you say he never was——

Mrs. FRAZIER. I never seen him drunk in my life.

The ACTING CHAIRMAN. Or under the influence of liquor?

Mrs. FRAZIER. No, sir; or under the influence of liquor.

The ACTING CHAIRMAN. Do you know Mr. Satterfield?

Mrs. FRAZIER. Yes, sir.

The ACTING CHAIRMAN. What do you know about him out there?

Mrs. FRAZIER. I don't know anything about Mr. Satterfield; only I know he is a very nice young man.

The ACTING CHAIRMAN. He is not there now, is he?

Mrs. FRAZIER. No, sir.

The ACTING CHAIRMAN. Did you ever see him drunk?

Mrs. FRAZIER. No, sir; I never seen anyone drunk at the laundry at all.

The ACTING CHAIRMAN. Have you seen him when you thought he was under the influence of liquor?

Mrs. FRAZIER. No, indeed; he never looked like it or acted like it.

The ACTING CHAIRMAN. What do you know about the way in which patients are treated out there by the attendants?

Mrs. FRAZIER. By the attendants?

The ACTING CHAIRMAN. Yes, by the employees.

Mrs. FRAZIER. I don't know anything, only I seen here during the last summer that Harry and a patient got in a scrap there. I was waiting at the drier, and of course I worked with my back to the patient all the time, and the patient works behind me. I looked behind me, and I saw Harry and the patient on the floor.

The ACTING CHAIRMAN. You mean Harry Satterfield?

Mrs. FRAZIER. Yes, sir. I don't know whether Harry throwed the patient or the patient throwed Harry. I didn't see that. When I looked behind me, both of them was lying on the floor. They got up, and there was no more of it. I didn't see Harry strike him or choke him, either one.

The ACTING CHAIRMAN. And how they got on to the floor you do not know?

Mrs. FRAZIER. I do not know. I happened to look behind, and I saw them on the floor.

The ACTING CHAIRMAN. Who was the patient?

Mrs. FRAZIER. The patient was named Willie.

The ACTING CHAIRMAN. How was he? Was he hard to handle, or not?

Mr. FRAZIER. He seemed to be a right quiet kind of a patient. I was surprised when I looked around and saw Willie on the floor. I don't know what the scrap was about, or nothing. I was at the drier, with eight machines behind me, and four wringers and three mangles. I didn't hear no noise at all. My back was to the patients all the time. I worked backwards to the patients all the time. I hang 35 pieces on the rack before I turn around, and shove them in. My back was to the patients all the time.

The ACTING CHAIRMAN. Did you ever see a patient knocked down out there?

Mrs. FRAZIER. No, sir.

The ACTING CHAIRMAN. Or abused?

Mrs. FRAZIER. No, sir. Only I seen this Allen. I saw him fist fighting Beedy there, one day.

The ACTING CHAIRMAN. What is that?

Mrs. FRAZIER. Fighting with his fist.

The ACTING CHAIRMAN. Striking Beedy?

Mrs. FRAZIER. A patient by the name of Beedy.

The ACTING CHAIRMAN. How did that come about?

Mrs. FRAZIER. I don't know. I happened to look around and he was striking Beedy with his fist.

The ACTING CHAIRMAN. Whereabouts was he striking him?

Mrs. FRAZIER. He was striking him in his head, and about his breast with his fist. He was striking Beedy and Beedy was striking he—tit for tat.

The ACTING CHAIRMAN. What kind of a patient was Beedy?

Mrs. FRAZIER. He was a quiet kind of a patient, but he wouldn't work unless you called him and tried to make him do something. He was a patient that would stand in one place all the time unless you told him to move. He would stand in one place all the time.

The ACTING CHAIRMAN. Do you know whether he was struck there to make him go to work?

Mrs. FRAZIER. I don't know. I turned around and this Allen was fist fighting.

The ACTING CHAIRMAN. You can not tell us what made them fight?

Mrs. FRAZIER. No, sir; I can not.

Mr. HAY. Who was Allen? One of the attendants?

Mrs. FRAZIER. He was employed in the wash house with the washing machines.

The ACTING CHAIRMAN. He was not a patient?

Mrs. FRAZIER. No, sir; Allen wasn't a patient. He was employed. Beedy was a patient.

The ACTING CHAIRMAN. Is there something about that that you know and do not want to tell?

Mrs. FRAZIER. No, indeedy; nothing I don't want to tell.

The ACTING CHAIRMAN. You are not trying to keep anything back?

Mrs. FRAZIER. No, sir; I am not keeping a thing back. The questions you ask me, if I can answer, I will answer them.

The ACTING CHAIRMAN. Did you talk with anybody before you came here about being a witness?

Mrs. FRAZIER. No, indeedy.

The ACTING CHAIRMAN. With Mr. Maenche?

Mrs. FRAZIER. No, sir.

The ACTING CHAIRMAN. Or anybody else out there?

Mrs. FRAZIER. No, sir; I have not.

The ACTING CHAIRMAN. You would tell us if you had, would you not?

Mrs. FRAZIER. Certainly I would tell you. It wouldn't do no harm, I suppose, if I would tell you.

The ACTING CHAIRMAN. No. Are there any other scenes that you witnessed out there of striking the patients?

Mrs. FRAZIER. Not in Doctor White's time.

The ACTING CHAIRMAN. That is what I am talking about.

Mrs. FRAZIER. You are talking about Doctor White's time?

The ACTING CHAIRMAN. Yes.

Mrs. FRAZIER. No, sir; not in Doctor White's time, I have not. I am telling you the truth.

The ACTING CHAIRMAN. How was the food there?

Mrs. FRAZIER. Well, the food was very good, as far as I see. Every time I goes to meals I gets enough of what is there to eat. I get enough of it.

The ACTING CHAIRMAN. How is it cooked?

Mrs. FRAZIER. It is cooked very good. They seem to have so many there to cook for, of course you can not have it all put up first-class.

The ACTING CHAIRMAN. Having that number of people to cook for, it is not like running a little house. Is that it?

Mrs. FRAZIER. That is what it is.

The ACTING CHAIRMAN. You know how to cook, do you?

Mrs. FRAZIER. Yes, sir; I know how to cook, and I know just what cooking calls for. Some days the dinner would be better than others.

The ACTING CHAIRMAN. What do you know, if anything, about running the little wagons, or cars, against some fellow there in the laundry?

Mrs. FRAZIER. Beedy?

The ACTING CHAIRMAN. Yes; Beedy.

Mrs. FRAZIER. Beedy was standing still, and the folks would come along with the cars of clothes, and they would run alongside of him and knock him away. He wouldn't get out of the way unless you told him.

The ACTING CHAIRMAN. Would they knock him down?

Mrs. FRAZIER. No; I never seen them knock him down. They would run the car against him and knock him aside. He won't get out of the way unless you holler at him. All the men in the wash house that run them cars done that.

The ACTING CHAIRMAN. Did you ever see any of them run the cars against him for the purpose of knocking him down?

Mrs. FRAZIER. I don't say for the purpose of knocking him down. He would stand right there, and they would knock him aside with the car; he would get out of the way and the car would pass by.

Mr HAY. What was a person of that sort doing in the laundry?

Mrs. FRAZIER. Beedy?

Mr. HAY. Yes.

Mrs. FRAZIER. I don't know. He was there, and he is there now.

Mr. HAY. What does he do around there?

Mrs. FRAZIER. He tends machines and tends to the wringer, and rolls the sheets through the mangle.

The ACTING CHAIRMAN. Did he know enough to do that kind of work?

Mrs. FRAZIER. Yes, sir.

The ACTING CHAIRMAN. Is he able to take care of himself and guard himself from injury from the machinery?

Mrs. FRAZIER. Yes, sir.

The ACTING CHAIRMAN. Would he not know enough to get out of the way of one of these cars?

Mrs. FRAZIER. He is that kind of a patient that stands right still in one place. He won't move unless you holler at him or push him out of the way. He stands still.

The ACTING CHAIRMAN. Did he do that purposely?

Mrs. FRAZIER. He did that all the time, Beedy did. He stands that way all the time when he ain't working.

TESTIMONY OF LLOYD GREEN.

LLOYD GREEN, being duly sworn, was examined, and testified as follows:

The ACTING CHAIRMAN. How old are you?

Mr. GREEN. Twenty years old.

The ACTING CHAIRMAN. Where do you live?

Mr. GREEN. Anacostia.

The ACTING CHAIRMAN. Are you employed out at the hospital?

Mr. GREEN. Not at the present time; no, sir.

The ACTING CHAIRMAN. Were you ever employed there?

Mr. GREEN. Yes, sir.

The ACTING CHAIRMAN. When?

Mr. GREEN. In 1904.

The ACTING CHAIRMAN. How long were you employed?

Mr. GREEN. Six months.

The ACTING CHAIRMAN. When did you begin?

Mr. GREEN. May 4.

The ACTING CHAIRMAN. Where were you employed?

Mr. GREEN. In the Allison building.

The ACTING CHAIRMAN. How many patients did you have?

Mr. GREEN. Twenty-eight.

The ACTING CHAIRMAN. Did you have any help?

Mr. GREEN. Yes, sir; four men on the ward. It was a hospital ward.

The ACTING CHAIRMAN. How were the patients treated there?

Mr. GREEN. Well; they was treated all right as far as I knew.

The ACTING CHAIRMAN. You never saw anything out of the way?

Mr. GREEN. No, sir. You couldn't very well do anything to them.

The ACTING CHAIRMAN. Why?

Mr. GREEN. They was sick. You couldn't hurt a sick man.

The ACTING CHAIRMAN. You could if you wanted to?

Mr. GREEN. Well, you wouldn't want to do it, I suppose.

The CHAIRMAN. Well, did any such thing happen?

Mr. GREEN. Not while I was there there didn't.

The ACTING CHAIRMAN. Did you see any such thing?

Mr. GREEN. No, sir.

The ACTING CHAIRMAN. From any attendant?

Mr. GREEN. No, sir.

The ACTING CHAIRMAN. You want this committee to understand that for the six months you were there in that ward you saw nothing in the way of cruel treatment to these patients?

Mr. GREEN. None of them was treated cruel on my ward.

The ACTING CHAIRMAN. I am talking about your ward. There was nothing of that kind?

Mr. GREEN. No, sir.

The ACTING CHAIRMAN. Are you holding back anything?

Mr. GREEN. Not at all.

The ACTING CHAIRMAN. Who were the attendants with you in that ward?

Mr. GREEN. There was Davis, and Tucker, and another fellow by the name of Kane.

The ACTING CHAIRMAN. In your ward did you have to feed your patients?

Mr. GREEN. Yes, sir; some of them you had to take your hand and feed them with it. They wasn't able to feed themselves.

The ACTING CHAIRMAN. What kind of food did they have?

Mr. GREEN. I don't know much about that. I never eat their food at all. I couldn't tell you much about that. I suppose it was all right though—good enough.

The ACTING CHAIRMAN. You did not eat the same food they ate?

Mr. GREEN. We did not eat the same food they did; no, sir; I did not.

The ACTING CHAIRMAN. In feeding them and caring for them, do you want us to understand that you and your associate attendants there treated these people as well as you knew how?

Mr. GREEN. As well as we knew how; yes, sir.

The ACTING CHAIRMAN. Is that true during the whole time you were there?

Mr. GREEN. That is true; yes, sir.

The ACTING CHAIRMAN. Why did you leave there?

Mr. GREEN. I went to sleep on night duty and got discharged.

The ACTING CHAIRMAN. On night duty?

Mr. GREEN. On night duty.

The ACTING CHAIRMAN. Did you see any mistreatment of patients yourself?

Mr. GREEN. No, sir; I did not.

Mr. HAY. How often did Doctor White visit the ward while you were there—the ward you were on?

Mr. GREEN. He might have visited when I was out sometimes; I couldn't exactly tell.

Mr. HAY. I mean when you were there on duty.

Mr. GREEN. Well, he visited about once a month, or something like that, to our side.

Mr. HAY. The board of visitors—were they there often while you were there?

Mr. GREEN. Well, they would come through, I think it was on Tuesdays.

Mr. HAY. Tuesday?

Mr. GREEN. Tuesday.

Mr. HAY. How many Tuesdays?

Mr. GREEN. Well, I don't know; I never saw them come through my ward at all. They might have come through when I was out sometimes.

Mr. HAY. Did you sign the petition that Mr. Pyles got up?

Mr. GREEN. Yes, sir; I did.

Mr. HAY. For an investigation by the board of visitors?

Mr. GREEN. Yes, sir.

Mr. HAY. If there was no cruel treatment and no abuse there, why did you sign the petition?

Mr. GREEN. In that petition there was not anything said that was cruel to the patients, as I saw it.

Mr. HAY. What was the petition? I have never seen it.

Mr. GREEN. I couldn't tell you exactly now what was on it.

Mr. HAY. What was it about? You did not sign a paper without knowing what you signed, did you?

Mr. GREEN. Well, he is there; he can tell you what is on it. He remembers more about it than I do.

Mr. HAY. I am asking you. I want to know what you know about it. Was not this petition sent in to the board for the purpose of complaining of something that was going on there?

Mr. GREEN. Well, something like that; yes.

Mr. HAY. What was going on that you had to complain of, that induced you to sign the petition?

Mr. GREEN. The food we got.

Mr. HAY. Oh, the food you got?

Mr. GREEN. Yes.

Mr. HAY. Was that the only grievance you had?

Mr. GREEN. That is all I had.

Mr. HAY. What was the character of that food? What was wrong about it?

Mr. GREEN. Well, we didn't get very much of any of it. That is, there was plenty of it, what it was; but it was not cooked right.

Mr. HAY. Was the food that the people got in your ward as good as the food you got?

Mr. GREEN. Better.

Mr. HAY. It was better?

Mr. GREEN. Yes, sir.

Mr. HAY. Did any person connected with the institution, who was an assistant superintendent who was in authority over there, say anything to you after you signed this petition as to whether you would stay there very long, or anything of that sort?

Mr. GREEN. No; he did not.

Mr. HAY. He did not?

Mr. GREEN. No, sir.

Mr. HAY. Did Doctor Hummer say anything to you in that line?

Mr. GREEN. He asked me why did I sign it. I told him that, but he didn't say anything to me about staying there any length of time after that.

Mr. HAY. How did he come to ask you about it; what led up to the conversation?

Mr. GREEN. He called me up for being late at night, and then he changed the conversation to that. He asked me why did I do it, and I told him.

Mr. HAY. And you were then discharged, were you?

Mr. GREEN. Sir?

Mr. HAY. Was that the time you were discharged?

Mr. GREEN. No, sir; that was a few months before.

Mr. HAY. You were discharged a few months before that?

Mr. GREEN. No; that was a few months before.

The ACTING CHAIRMAN. You misunderstand him.

Mr. HAY. Oh, that was a few months before you were asleep on duty?

Mr. GREEN. Yes, sir.

Mr. HAY. How often did the physician in charge of the ward you were on go through the ward and look after the sick people?

Mr. GREEN. They would go through there every day.

Mr. WALLACE. Let me ask you a question please. Do you remember the number of patients on your ward?

Mr. GREEN. Twenty-eight we are supposed to carry.

Mr. WALLACE. What was the number of helpers?

Mr. GREEN. Four.

Mr. WALLACE. What was your method of restraining them, of controlling them?

Mr. GREEN. We did not need to do much to them at all. They was mostly sick, you know; all in bed.

Mr. WALLACE. What was the kind and frequency of the medical treatment they received?

Mr. GREEN. It was all right.

Mr. WALLACE. By the doctors there?

Mr. GREEN. Yes, sir.

Mr. WALLACE. Of the hospital?

Mr. GREEN. Yes, sir.

TESTIMONY OF MRS. MARY McLAUGHLIN.

Mrs. MARY McLAUGHLIN, being duly sworn, was examined and testified as follows:

The ACTING CHAIRMAN. What is your name?

Mrs. McLAUGHLIN. Mrs. Mary McLaughlin.

The ACTING CHAIRMAN. Where do you live?

Mrs. McLAUGHLIN. At St. Elizabeth's.

The ACTING CHAIRMAN. Are you an employee there?

Mrs. McLAUGHLIN. I am a nurse.

The ACTING CHAIRMAN. How long have you been there?

Mrs. McLAUGHLIN. I have been in the institution 25 years.

The ACTING CHAIRMAN. Continuously?

Mrs. McLAUGHLIN. Yes, sir.

The ACTING CHAIRMAN. So you were there under Doctors Godding, Richardson, and White?

Mrs. McLAUGHLIN. Yes, sir.

The ACTING CHAIRMAN. Confining yourself to the period of Doctor White's superintendency, where, in what ward, have you been engaged?

Mrs. McLAUGHLIN. I have always been, since Doctor White has gone there, employed as a nurse in the male hospital wards.

The ACTING CHAIRMAN. How many patients have you to look after?

Mrs. McLAUGHLIN. Well, on the ward I am on at present there is supposed to be three men and myself. Our capacity is 26 patients, but we never have that many. The gentleman that is in charge of the ward is in an orchestra, and he is called away twice a week to rehearsals, and the other young man generally takes a half day a week off. This leaves me a considerable time alone, with one young man and myself.

The ACTING CHAIRMAN. Have you help enough, under the circumstances?

Mrs. McLAUGHLIN. No; I do not think so. I know we have not.

The ACTING CHAIRMAN. What is the character of the patients you have to look after? Are they bed fast or otherwise?

Mrs. McLAUGHLIN. Well, both classes.

The ACTING CHAIRMAN. What has been the treatment of patients there, from your observation, under Doctor White?

Mrs. McLAUGHLIN. The very best, so far as I can see. I have never saw no cruelty.

The ACTING CHAIRMAN. When you say that do you mean to include whatever wards you have been on, or simply on your ward?

Mrs. McLAUGHLIN. Simply in my ward. I don't have no redress to know what is going on in other wards, only as I would be told.

The ACTING CHAIRMAN. I mean from what you yourself saw. You say you had not any means of observing that?

Mrs. McLAUGHLIN. Nothing but kindness; and I don't see how it could go on while I was present.

The ACTING CHAIRMAN. How was the food that was furnished for the patients in your ward?

Mrs. McLAUGHLIN. Why, very good. In the hospital wards the food is very good that I have charge of.

The ACTING CHAIRMAN. What sort of attention and care was given the patients by either Doctor White or the physicians in charge there?

Mrs. McLAUGHLIN. Well, the physicians in charge, I don't see how they could give better attention than what the patients under my care receive.

The ACTING CHAIRMAN. Pardon me, is it Miss or Mrs. McLaughlin?

Mrs. McLAUGHLIN. Mrs.

The ACTING CHAIRMAN. I wish you would in your own way briefly describe the food that your patients get.

Mrs. McLAUGHLIN. Well, every morning and every evening we have oatmeal and milk toast and generally a sauce of some kind and soft-boiled eggs. That is not for all, just for the patients whose appetite is not so good—and meat of some kind, and bread and butter.

The ACTING CHAIRMAN. And coffee?

Mrs. McLAUGHLIN. Yes; coffee and tea and milk.

The ACTING CHAIRMAN. Do you have chicken at any time?

Mrs. McLAUGHLIN. Yes, sir; generally on Sundays we have baked chicken sent up. Of course we have to cut it up and prepare it ourselves. Very often they cream the chicken and sent it up, which is more appropriate for the hospital wards. Those old men are not able, they have not the teeth, to chew it. We always cut it up very fine.

The ACTING CHAIRMAN. You have been there, you say, twenty-five years?

Mrs. McLAUGHLIN. Yes, sir.

The ACTING CHAIRMAN. And I take it you know something of the character of the food that ought to be given to such patients as you have in charge?

Mrs. McLAUGHLIN. Yes.

The ACTING CHAIRMAN. What do you say is the food adapted to the class and character of patients that you have supervision of?

Mrs. McLAUGHLIN. I think it is all right. I think, though, occasionally they should have fresh fruit bought for them and given to them, such as oranges or bananas or lemons, in the summer time, to make lemonade for them, which we have had.

Mr. HAY. Mrs. McLaughlin, what are your hours of work?

Mrs. McLAUGHLIN. Our hours are very long. That is the most trying part about it, with the short help.

Mr. HAY. When do you begin in the morning?

Mrs. McLAUGHLIN. I am on the ward every morning at half past 6.

Mr. HAY. How long do you stay on?

Mrs. McLAUGHLIN. We stay on alternately. One evening until 8, and the next day until about quarter after 5, after supper.

Mr. HAY. Some days you are on duty twelve hours, are you?

Mrs. McLAUGHLIN. Oh, yes; from half past 6 until 8.

Mr. HAY. Is that because of the fact that they have not sufficient attendants?

Mrs. McLAUGHLIN. Well, I think that has always been the rule, those hours.

Mr. HAY. That always has been the rule?

Mrs. McLAUGHLIN. It always has been the rule.

Mr. HAY. Do you think an attendant who has to work as long as that is able to give as good care as he would be if he only had a shorter time to work?

Mrs. McLAUGHLIN. Well, I think if the pay was better, and they would have shorter hours, I should think they would get better service; and it is my own judgment that some of the employees are entirely too young to use their judgments in the care of these old men. But if they are not considered themselves, and have their own judgment to do that, I do not see how the superintendent or the physicians could be blamed for the ill treatment of patients when they employ these people, but I think they ought to be a different class, from my observation.

Mr. HAY. What has been your observation? You have been there for a long time. What has been your observation as to the changing of these employees? How long do they remain, generally?

Mrs. McLAUGHLIN. Well, some of them do not remain very long; but of course I do not know anything about the wards only since I have taken up the training. The last five years I spent all my time, since I graduated, on the male hospital wards.

Mr. HAY. Did you pass a civil service examination?

Mrs. McLAUGHLIN. No.

Mr. HAY. You were there before that went into operation?

Mrs. McLAUGHLIN. I was there before that went into operation.

Mr. HAY. As I understand it, all the employees there, both male and female, have to stand, to-day, a civil service examination?

Mrs. McLAUGHLIN. I think they do, but I am not positive. I do not know anything about it, but I have heard them say they did.

Mr. HAY. So that if the institution needs an employee in any of the wards, or anything of the kind, they call on the Civil Service Commission, I suppose.

Mrs. McLAUGHLIN. They say they do, but I could not tell you positively.

Mr. HAY. You do not know what kind of an examination they have to stand, of course.

Mrs. McLAUGHLIN. No, I do not know.

Mr. WALLACE. I would like to ask her a question. Mrs. McLaughlin, can you relate any abuses coming under your observation there, such as beating and otherwise mistreating patients, by one George Thorn?

Mrs. McLAUGHLIN. Thorn?

Mr. WALLACE. Yes.

Mrs. McLAUGHLIN. No, sir; I have never known Mr. Thorn to abuse a patient, but I have never heard a patient speak well of him. They have all come to me with reports against him.

Mr. WALLACE. They have reported against him to you?

Mrs. McLAUGHLIN. Always they have reported against him. There is a patient over there now on the ward with Thorn, and he has a parole to go in to town and out, and he has told me frequently of Mr. Thorn—of abuses that were done under his care—but I don't know anything about it.

Mr. WALLACE. Who told you that?

Mrs. McLAUGHLIN. Frank Davy.

Mr. WALLACE. He told you of these abuses by Thorn?

Mrs. McLAUGHLIN. Yes; he has told me on several occasions.

Mr. WALLACE. Who is Frank Davy?

Mrs. McLAUGHLIN. He is a patient that has been committed to the hospital. He has a parole, and he goes to town. He is not locked up. He has a parole every day, and the patients tell me about their abuses, where I have often felt sorry, where I have been on the hospital ward, and they have been sent to the hospital ward under our care. They have all told us about the abuses they received from the attendants. All we had was the patient's word, and we took care of them under the direction of the doctors.

Mr. HAY. How often does the present superintendent, Doctor White, come through your ward?

Mrs. McLAUGHLIN. When I was on the male hospital ward, the old building, up to a year ago, he came every Sunday, and since I have been on the ward that I am on now, the hospital ward, to my knowledge he has visited the ward twice since last July.

Mr. HAY. The board of visitors comes over there how often? Do you know?

Mrs. McLAUGHLIN. They are supposed to come the first Tuesday in every month, but they have never come on our ward. Mrs. Gangewer is the only one I have seen. I have seen her twice within the month.

Mr. HAY. Who is that?

Mrs. McLAUGHLIN. Mrs. Gangewer; but she didn't see the patients only once. She didn't go down in the dormitories.

Mr. HAY. Is she on the board of visitors?

Mrs. McLAUGHLIN. She is on the board of visitors, and has been on a number of years.

Mr. HAY. I did not catch the name.

Mrs. McLAUGHLIN. Mrs. Gangewer.

Mr. HAY. So that, so far as you know, the board of visitors during the last three or four years has not been in your ward at all?

Mrs. McLAUGHLIN. They visited the ward when I was on Oak. I have seen them on the hospital wards on Oak, but not on the new buildings, not on the ward I have been on.

Mr. BARCHFELD. Mrs. McLaughlin, how is the management of the institution to-day, as compared with the management of the institution under Dr. Richardson?

Mrs. McLAUGHLIN. I don't know as I can answer that very accurately. I was a nurse under Dr. Richardson. It was through him that I went into the training. I think Dr. Richardson was more freer to supply the wants of the patients. I think we had more under Dr. Richardson.

Mr. BARCHFELD. How about Dr. Godding?

Mrs. McLAUGHLIN. I couldn't tell you. I was not on the wards with Dr. Godding.

Mr. BARCHFELD. Were you not at the institution under Dr. Godding?

Mrs. McLAUGHLIN. Yes; I was in the sewing room for a good many years, and also had charge of the nurses' dining room until Dr. Richardson came, and I took up the training.

Mr. BARCHFELD. You are not a graduate nurse?

Mrs. McLAUGHLIN. Yes, I am.

Mr. BARCHFELD. You graduated from St. Elizabeth's?

Mrs. McLAUGHLIN. From St. Elizabeth's; yes, sir.

Mr. BARCHFELD. How long ago?

Mrs. McLAUGHLIN. About five years ago. I was one of the first class. It was through Dr. Richardson's persuasion that I took up the training.

Mr. BARCHFELD. How many nurses have they in training there at the present time?

Mrs. McLAUGHLIN. That question I can not answer you.

Mr. BARCHFELD. About how many?

Mrs. McLAUGHLIN. I couldn't tell you. I am confined to the male wards from morning until evening, and I really do not know very many of the nurses outside of my own ward.

Mr. BARCHFELD. These attendants that are furnished you in your ward have all passed a civil-service examination. Is that true?

Mrs. McLAUGHLIN. I don't know about Mr. Teats, the gentleman that is in charge, whether he had to take the civil service examination or not. I think he has been there eight or nine years. I couldn't answer that question. I don't know.

Mr. BARCHFELD. Do you know how long that institution has been put under the civil service?

Mrs. McLAUGHLIN. I don't know that, either.

Mr. BARCHFELD. Has it been three years, five years, or ten years?

Mrs. McLAUGHLIN. I couldn't tell you.

Mr. BARCHFELD. What, if you are able to tell, is the difference in the institution at the present time, under the civil service, as compared with the institution before the civil service was inaugurated?

In other words, is the management of the institution, and the operation, and the help supplied better under the civil service than it was previous to inaugurating the civil service, or is it worse?

Mrs. McLAUGHLIN. I don't know. I believe it is worse. I think the old employees we have, as far as I know, give better service than the employees they get now.

Mr. BARCHFELD. As far as you know, then, the institution being under the civil service, Doctor White must take any help that the Civil Service Commission hand him?

Mrs. McLAUGHLIN. I couldn't answer that question, either.

Mr. BARCHFELD. He has no choice in the hiring of help?

Mrs. McLAUGHLIN. Not to my knowledge.

Mr. BARCHFELD. He must take his help from a list, as qualified by the Civil Service Commission?

Mrs. McLAUGHLIN. I know he is very quick in discharging them. The reports go direct to Doctor White.

Mr. BARCHFELD. That is his power?

Mrs. McLAUGHLIN. I know of one case that came under my observation. A patient was ill treated, and Doctor White took it right to court and had the man discharged right away.

Mr. HAY. Who was that man?

Mrs. McLAUGHLIN. His name was Goodall. There was a man by the name of Hall—

The ACTING CHAIRMAN. That is, Doctor White instituted criminal proceedings?

Mrs. McLAUGHLIN. Yes, sir.

Mr. HAY. You said something about a man named Teats, and I think there has been some evidence here about his cruel treatment of patients?

Mrs. McLAUGHLIN. Mr. Teats has charge of the ward I am on.

Mr. HAY. How long has he had charge of that ward?

Mrs. McLAUGHLIN. I went on the ward there about the 15th of July, and this Mr. Thorn had charge of the ward, and he was away on a vacation; and when he returned and found out that I had charge of the ward he said he was very sorry. He said: "I don't care to work with you, Mrs. McLaughlin." I says: "For what reason?" He said: "I don't know;" but I knew his reasons; because he knew I would watch him thoroughly. He knew that I knew what a recommendation he had of ill treating patients.

Mr. HAY. This is Mr. Thorn you are talking about?

Mrs. McLAUGHLIN. This is Thorn. I don't think I ever went to Doctor White. I always felt that it was my duty to go to Doctor White and explain to him.

The CHAIRMAN. Do you mean Beach or Teats?

Mrs. McLAUGHLIN. Teates. T-e-a-t-e-s, I think he spells the name. Mr. Belt put in evidence against Mr. Teates. Mr. Belt was on the ward with me also.

Mr. HAY. Was Mr. Teates in charge of the ward you are now in at the same time this Mr. Belt was there?

Mrs. McLAUGHLIN. Yes, sir.

Mr. HAY. Did you see Mr. Teates do anything to those men?

Mrs. McLAUGHLIN. Nothing, only what has been kind to the patients in my presence, and he is a man I put a good deal of confidence in. I don't think he would.

Mr. BARCHFELD. You think the character of the attendants, first as to age, and experience, and competency, discriminates against the best management of the institution?

Mrs. McLAUGHLIN. I do.

Mr. BARCHFELD. That is all.

The ACTING CHAIRMAN. Is it your opinion from twenty-five years' observation there that if the superintendent was untrammelled in the selection of attendants you would get a higher grade of attendants?

Mrs. McLAUGHLIN. Well, I think if there were shorter hours and more pay that they would get a better class; but they say the pay is nothing. I have often heard them say myself: "We don't care for the pay. It is nothing." They don't seem to have judgment enough to care whether they do right or wrong. I have heard them express themselves—different ones—and I think those old men need an older class that will use a little judgment. I can see it myself. With the old men they will pack up a sheet full of clothes, that makes my heart ache many a time, and carry it into the laundry, and those boys, the attendants over them, walk along back of them with their hands in their pockets, which is cruel. They use no judgment. There is lots of little things like that, that if a person has a little judgment they could help the patients out a great deal. I do not think the fault lies with the superintendent or the physicians in charge. If they hire these people, they hire them to do their duty, but they don't do it. It is their own conscience.

TESTIMONY OF D. J. DONOHUE.

D. J. DONOHUE, being duly sworn, was examined, and testified as follows:

The ACTING CHAIRMAN. Where do you live?

Mr. DONOHUE. I live at St. Elizabeth's.

The ACTING CHAIRMAN. How long have you been there?

Mr. DONOHUE. I have been there three years the 4th of July.

The ACTING CHAIRMAN. Are you employed there?

Mr. DONOHUE. Yes, sir.

The ACTING CHAIRMAN. In what capacity?

Mr. DONOHUE. As an attendant.

The ACTING CHAIRMAN. In what yard?

Mr. DONOHUE. West Lodge, second.

The ACTING CHAIRMAN. Have you been there all the time in that ward?

Mr. DONOHUE. No, sir; I have not.

The ACTING CHAIRMAN. What other ward have you worked in?

Mr. DONOHUE. I have been on annex first and annex second.

The ACTING CHAIRMAN. Who are your associate attendants in the ward in which you are now engaged?

Mr. DONOHUE. A man by the name of Dyer.

The ACTING CHAIRMAN. How old are you?

Mr. DONOHUE. Thirty-two years old.

The ACTING CHAIRMAN. How old is Mr. Dyer?

Mr. DONOHUE. I think he is 21 or 22.

The ACTING CHAIRMAN. Who were your associates in the other wards?

Mr. DONOHUE. One was an attendant by the name of Mr. Hogan; another by the name of Mr. Boswell; another by the name of Mr. Doran, and another by the name of Mr. Thorn.

The ACTING CHAIRMAN. How many patients have you in the ward where you are at work now?

Mr. DONOHUE. The capacity of my ward now, or rather up to now, is 40 patients, but at the present time I have 34 patients.

The ACTING CHAIRMAN. With one attendant?

Mr. DONOHUE. Two attendants, sir.

The ACTING CHAIRMAN. Besides yourself?

Mr. DONOHUE. One besides myself.

The ACTING CHAIRMAN. What is the character of the patients you have in charge?

Mr. DONOHUE. They have a mild form; nothing ferocious whatsoever about them.

The ACTING CHAIRMAN. How do you treat them?

Mr. DONOHUE. We treat them decently.

The ACTING CHAIRMAN. How does your associate attendant treat them?

Mr. DONOHUE. He treats them just as I do. He takes pattern of me.

The ACTING CHAIRMAN. Do you try to direct him, being older than he, in the treatment of the patients?

Mr. DONOHUE. Yes, sir.

The ACTING CHAIRMAN. Did you ever mistreat any of them?

Mr. DONOHUE. No, sir; I have not.

The ACTING CHAIRMAN. During the whole time you were there?

Mr. DONOHUE. During the whole time I have been there.

The ACTING CHAIRMAN. Did you ever see any of the patients ill treated?

Mr. DONOHUE. Well, I have patients there treated in such a manner as when it is necessary to put on straps on them, of course, you know, or any man does know, that you have got to handle a patient and handle him in such a position as to put straps on him. Of course it is safer to have them on than it is to have them without them. He is dangerous to himself, or the other patients, and also to the attendants.

The ACTING CHAIRMAN. Is that the reason they are put on?

Mr. DONOHUE. That is the simple reason that they are put on, sir. In fact, I have put them on in local hospitals here in Washington, let alone St. Elizabeth's.

The ACTING CHAIRMAN. How long have you been engaged in hospital work?

Mr. DONOHUE. I guess about seven or eight years, as an attendant and nurse in local hospitals, and for the past three years at St. Elizabeth's.

The ACTING CHAIRMAN. Did you ever witness any cruelty out there in the placing of these straps?

Mr. DONOHUE. No, sir; I have not.

The ACTING CHAIRMAN. If you have, describe it.

Mr. DONOHUE. No, sir; I have not, only the necessary force for to hold a patient to put him in such a position as to put the straps on.

The ACTING CHAIRMAN. Would you, as an attendant, stand by out

there and witness cruel treatment toward a patient and not talk about it?

Mr. DONOHUE. I would not.

The ACTING CHAIRMAN. And complain of it?

Mr. DONOHUE. I would not see it done. I would report it.

The ACTING CHAIRMAN. Civil service or no civil service?

Mr. DONOHUE. Civil service or no civil service. My conscience would not allow me to see none of it.

The ACTING CHAIRMAN. We take our hats off to you.

Mr. DONOHUE. Well, I am glad to hear it, sir. [Laughter.]

The ACTING CHAIRMAN. What is your nationality?

Mr. DONOHUE. I am Irish, sir. [Laughter.] And my name is Donohue. That will make it better, again. [Laughter.]

The ACTING CHAIRMAN. Next to the Germans, they are the salt of the earth. [Laughter.]

Mr. DONOHUE. You know, I was reading the Times last night, and the lawyers have a clam bake down at Marshall Hall. Perhaps you have read it?

The ACTING CHAIRMAN. I noticed it.

Mr. DONOHUE. There is a great many lawyers in Washington with Irish names, and a lawyer by the name of Dutch. It would do you good to read it. [Laughter.]

The ACTING CHAIRMAN. Now, Mr. Donohue, we want whatever knowledge you have as to the misconduct, mistreatment, out there, of patients, if you have any such knowledge.

Mr. DONOHUE. Well, my knowledge of the institution is that I think it is conducted in a proper way. For instance, I have seen Doctor White go through my ward speaking to men on my ward. On several occasions I have seen Doctor White and his assistant physicians visiting the Howard Hall, on Sunday after Sunday. I have also seen the assistant physicians visiting the wards at all times during the day. I have seen Doctor Swain—he is an assistant now; his predecessor was Doctor Toner. He came at all hours. In fact, he would come often when you least expected him. I have seen Doctor Fitch at all times going on the wards. I have known Doctor Fitch—he is on night duty—to attend his patients and go through the wards when it is necessary or it is wanted.

I want to make a little statement here in regard to a patient giving his testimony this week. His name was Shuster. He gave damaging testimony toward attendants at St. Elizabeth's. That patient I have taken care of five years ago in one of the local hospitals in Washington, and I have put straps on him.

The ACTING CHAIRMAN. Why?

Mr. DONOHUE. Because it was necessary—because it was necessary, sir. I have used straps on him, tied him to the bed, in fact. I had to do it. Now, there has been an attendant accused by the name of Mr. Hogan. I have been on with him, in Annex Second, as an assistant to him, he having charge of the ward. We had 50 patients, and there was 4 attendants. I found him to be a perfect gentleman. I never saw him injuring a patient. He might speak cross, or he might make them set down, but any more than that I have never seen.

The ACTING CHAIRMAN. Do you regard him as competent?

Mr. DONOHUE. I do. I regard him as a gentleman.

The ACTING CHAIRMAN. And a good attendant?

Mr. DONOHUE. Yes; I do. He is not employed at St. Elizabeth's now. He is employed in some part of Washington.

Mr. HAY. Mr. Donohue.

Mr. DONOHUE. Yes, sir.

Mr. HAY. What class of patients are confined in Howard Hall?

Mr. DONOHUE. About the patients that is confined in Howard Hall?

Mr. HAY. Yes; what class of patients are there in Howard Hall?

Mr. DONOHUE. The class of patients confined in Howard Hall, as far as I know, are a dangerous class of patients—a dangerous class.

Mr. HAY. Do you know whether the criminals there, who are insane, are confined in the same wards and places as patients who are not criminals?

Mr. DONOHUE. No; I don't think so. I guess the officials of the institution know how to manage those patients in regard to that.

Mr. HAY. What I want to get at is whether the criminal insane are mixed up with those people who are not criminals.

Mr. DONOHUE. No, sir.

Mr. HAY. You don't know?

Mr. DONOHUE. I don't know; but I don't think so.

Mr. HAY. What are your hours of work?

Mr. DONOHUE. In fact, our hours of work are very long, and tedious, and wearing. We go on duty at 6 in the morning. Say you take it this morning, for instance. We go on duty at 6 o'clock in the morning, and we remain on duty until 8 o'clock in the evening. Then we are supposed to be on duty, even if we do go to bed. We can not come out of our wards until the following day at 5 o'clock. Then we are given four or five hours for recreation, to go to town and do what we please; but we have got to be back at a certain time, and stick up to the rules, or if not we lose our positions. Therefore, it is in rotation every day, like that, with three evenings off the ward in a week, and three evenings on.

Mr. HAY. Do you mean to say that after you have been on from 6 to 8 you are again on in the evening?

Mr. DONOHUE. Sir?

Mr. HAY. That you are again on in the evening after 8 o'clock? You get off at 8 o'clock for good, do you not?

Mr. DONOHUE. No, sir.

Mr. HAY. You are still on?

Mr. DONOHUE. Yes, sir; I stay on the ward.

Mr. HAY. What is your opinion about the hours of work; do you think they are too long?

Mr. DONOHUE. Indeed, they are entirely too long; and, of course, the only thing I see in remedying that—of course that is not Doctor White's fault, and Congress could easily fix that in regard to giving us less hours and more money. [Laughter.]

Mr. HAY. You think there should be an increased appropriation for the purpose of employing—

Mr. DONOHUE. I think so. I think if they gave it, and Mr. Cannon signed it, Doctor White would be only too glad to give it to us.

Mr. HAY. I have no doubt of it. [Laughter.] What we are trying to do is to find out about the conditions out there.

Mr. DONOHUE. I am giving you the facts, sir.

Mr. HAY. So that we may do that, if we can get the House to do it.

I do not know whether they will or not. If Congress had been apprised by those in charge of the institution of the conditions out there, the probability is that it would have been changed long ago.

Mr. DONOHUE. I was reading in the paper yesterday where the civil-service employees had no satisfaction for getting anything.

Mr. HAY. I am not talking about the employees, but about those in charge of the institution.

Mr. DONOHUE. Then, you can not blame the superintendent in charge. That had a right to be seen to long ago.

Mr. HAY. I am not blaming anybody, now.

Mr. DONOHUE. All right, sir.

Mr. BARCHFELD. Are you under the civil service now?

Mr. DONOHUE. Yes.

Mr. BARCHFELD. Did you pass a civil-service examination to get into the institution?

Mr. DONOHUE. Yes, sir.

Mr. BARCHFELD. Will you kindly tell us what your civil-service examination consisted of?

Mr. DONOHUE. It consisted of my occupations that I was in in former years, before I applied for the position at St. Elizabeth's.

Mr. BARCHFELD. Was there any educational or intellectual qualification?

Mr. DONOHUE. Yes; there was no mental examination.

Mr. BARCHFELD. Were you compelled to read or write at this examination?

Mr. DONOHUE. No; I was not.

Mr. BARCHFELD. In other words, you simply certified your name as having been engaged at a previous time—

Mr. DONOHUE. I took it to a notary public and had it sworn in in regard to my handwriting.

Mr. BARCHFELD. That was the extent of your examination?

Mr. DONOHUE. That was the extent of my examination.

Mr. BARCHFELD. No examination at all, in fact. You simply certified that you wanted to be recognized as a civil-service applicant for this position?

Mr. DONOHUE. That is what it called for, I think.

Mr. BARCHFELD. That is all?

Mr. DONOHUE. That is all.

Mr. BARCHFELD. There was no examination held?

Mr. DONOHUE. There was a doctor examined me as to my physical condition.

Mr. BARCHFELD. I understand, but outside of the physical examination there was no other examination?

Mr. DONOHUE. No mental examination.

Mr. BARCHFELD. That is your civil service.

Mr. HAY. Did you not have to fill out an examination blank?

Mr. DONOHUE. Yes, sir.

Mr. HAY. In your own handwriting?

Mr. DONOHUE. In my own handwriting.

Mr. HAY. And this application blank consisted of various questions asked you about your age and your former occupation?

Mr. DONOHUE. Yes, sir.

Mr. HAY. Where you had lived, and so forth, and so on?

Mr. DONOHUE. Yes, sir.

Mr. HAY. Then did you not have to have the affidavit of somebody who knew you?

Mr. DONOHUE. Why, yes.

Mr. HAY. As to your character?

Mr. DONOHUE. Yes, sir.

Mr. HAY. And so on?

Mr. DONOHUE. Yes; I did.

Mr. HAY. And after that application was filled up and these affidavits were made you had to pass the physical examination. Then, if these questions were properly answered and the physical examination was passed, then you were eligible to be put in one of these places out there?

Mr. DONOHUE. Yes.

Mr. HAY. And that is all you had to do?

Mr. DONOHUE. No; I had to go through a physical examination afterwards.

Mr. HAY. I say after you took the physical examination.

Mr. DONOHUE. If I was not fit for the position I would not be accepted.

Mr. HAY. A physical examination had to be passed before you were eligible to be put on the list?

Mr. DONOHUE. Yes.

Mr. HAY. But all the examination you had was the filling up of this application?

Mr. DONOHUE. That is all.

Mr. HAY. After that, when you went out to the hospital, were you examined there by the Superintendent or by anybody else?

Mr. DONOHUE. I was examined by one of the assistant physicians.

Mr. HAY. You mean you were given what sort of an examination; a physical examination?

Mr. DONOHUE. Yes, sir.

Mr. HAY. I mean any other kind of an examination.

Mr. DONOHUE. No, sir.

Mr. HAY. Were you asked any other questions?

Mr. DONOHUE. No, sir; but they saw by my application that I had had practical experience as a hospital man.

Mr. HAY. So, if you passed a civil-service board, the authorities had no power to turn you down?

Mr. DONOHUE. Why, yes.

Mr. HAY. You do not understand me. Do you mean to say that they had power to turn you down?

Mr. DONOHUE. That is, if I didn't pass.

The ACTING CHAIRMAN. You don't understand Mr. Hay's question.

Mr. HAY. The question I am getting at is, if you passed the physical examination, and the civil service, and had been certified by the civil-service board to Doctor White, or to whoever these certifications would go, then Doctor White and these other authorities of the asylum had no power to turn you down. They could not discharge you?

Mr. DONOHUE. Oh, I don't know about that.

Mr. HAY. You do not know?

Mr. DONOHUE. I do not know.

The ACTING CHAIRMAN. In your civil-service examination did the physician, if it was a physician who examined you——

Mr. DONOHUE. Yes, sir.

The ACTING CHAIRMAN. Did he ask you about how you would treat the patients? Did he ask you anything about your disposition?

Mr. DONOHUE. He certainly did, and that was Doctor Toner. He gave me instructions.

The ACTING CHAIRMAN. That was out at the hospital?

Mr. DONOHUE. No; that was in the hospital; the day I was taken, the day they sent for me.

Mr. HAY. The day he was sworn in?

Mr. DONOHUE. Yes; he gave me my instructions.

The ACTING CHAIRMAN. But I mean before.

Mr. DONOHUE. Oh, no.

The ACTING CHAIRMAN. Before you got to the hospital, when you were being examined, were you asked any questions as to how you would treat these patients?

Mr. DONOHUE. No; but as I say, when they sent for me, to give me the position, then I was instructed.

The ACTING CHAIRMAN. Oh, yes, I understand. Then you got instructions out there.

Mr. DONOHUE. Not before then, though; not before.

The ACTING CHAIRMAN. You got instructions then as to what your duties were?

Mr. DONOHUE. Yes, sir.

Mr. HAY. In this application that you made out, were there any questions which would enable Dr. White or the Civil Service Commission to know as to your experience in the treatment and care of the insane?

Mr. DONOHUE. I don't think there was any flaw whatsoever.

Mr. HAY. You do not think what?

Mr. DONOHUE. I don't think there was any flaw or mistake in regard to what I put down.

The ACTING CHAIRMAN. He does not understand you.

Mr. HAY. What I am trying to get at is this: In this application that you signed in order to get this position out here, was there any question which would have enabled Doctor White or the Civil Service Commission to know whether you had been treating or having anything to do with the insane before you went out there?

Mr. DONOHUE. I don't think so.

Mr. HAY. I would like to see one of those applications.

Doctor WHITE. I will bring one.

Mr. BARCHFELD. How was the food served in your ward?

Mr. DONOHUE. Why, in regard to the food, of course, gentlemen, that is a pretty large boarding house, and there has got to be quite a considerable lot of food cooked at one time. And you know it is not so delicious or so flavorful to the appetite as it would be if it was cooked in small quantities; but on the food question again, I say it is pretty good.

Mr. BARCHFELD. The question of getting the food served hot and warm is a weighty problem in all institutions. I see that institution over there is supplied with a system of tramways or cars to carry the food from the kitchen to the various wards.

Mr. DONOHUE. Yes, sir.

Mr. BARCHFELD. They get it out there about as quickly as it can be done, do they not?

Mr. DONOHUE. They do. They make all possible haste with it.

Mr. BARCHFELD. Is the food that is served at your table—that is, the attendants' table—

Mr. DONOHUE. Yes, sir.

Mr. BARCHFELD. Is it up to the standard of that served in other institutions of the same kind in which you have served?

Mr. DONOHUE. No, I would like to have it a little better. Still, there is no fault to be found with it.

Mr. BARCHFELD. The food to the inmates; is it as good as is served at other institutions, as far as you know?

Mr. DONOHUE. Yes, sir.

The CHAIRMAN. I guess that is all, Mr. Donohue.

Mr. DONOHUE. All right, gentlemen.

TESTIMONY OF ROGER CULLINANE.

ROGER CULLINANE, being duly sworn, was examined, and testified as follows:

The ACTING CHAIRMAN. What is your name?

Mr. CULLINANE. Roger J. Cullinane.

The ACTING CHAIRMAN. Are you an employee out at the hospital?

Mr. CULLINANE. No, sir; not at present. I have been.

The ACTING CHAIRMAN. When were you employed out there?

Mr. CULLINANE. I was there as late as two years ago. I left there two years ago last March.

The ACTING CHAIRMAN. How long were you employed out there?

Mr. CULLINANE. About twelve years.

The ACTING CHAIRMAN. Were you there under Doctor Godding?

Mr. CULLINANE. Yes, sir.

The ACTING CHAIRMAN. And Doctors Richardson and White?

Mr. CULLINANE. Yes, sir.

The ACTING CHAIRMAN. Covering the period of Doctor White's superintendency, what was your employment?

Mr. CULLINANE. I was in charge of one of the wards in the institution—the White Ash Ward.

The ACTING CHAIRMAN. Were you the supervisor, or an attendant?

Mr. CULLINANE. I was what they called the head attendant. I used to have about forty patients in that ward and four, sometimes three, attendants. They were supposed to be a right violent class of patients. The patients were always treated well as far as I know.

The ACTING CHAIRMAN. Did you ever strap any?

Mr. CULLINANE. Not since Doctor White has been there. The straps were taken away off the ward at that time.

The ACTING CHAIRMAN. Why were they taken away?

Mr. CULLINANE. I couldn't tell you that.

The ACTING CHAIRMAN. How did you restrain the patients?

Mr. CULLINANE. We didn't restrain them at all.

The ACTING CHAIRMAN. You just let them go. You tried to preserve order, did you not?

Mr. CULLINANE. No.

The ACTING CHAIRMAN. Well, what did you do? Just tell us.

Mr. CULLINANE. Well, when they got unruly, or fighting, we had to lock them up a little while, sometimes ten or fifteen minutes, and when they calmed down you would probably have no trouble with them for a month again.

The ACTING CHAIRMAN. You never strapped any after Doctor White was there?

Mr. CULLINANE. No.

The ACTING CHAIRMAN. Or strait-jacketed them?

Mr. CULLINANE. No, sir.

The ACTING CHAIRMAN. Or put them in the resting sheet?

Mr. CULLINANE. No, sir.

The ACTING CHAIRMAN. Nor did any of these attendants under you?

Mr. CULLINANE. No, sir.

The ACTING CHAIRMAN. But they were locked in the room?

Mr. CULLINANE. Yes, sir; for a short time.

The ACTING CHAIRMAN. Did you ever knock any of them down?

Mr. CULLINANE. No, sir.

The ACTING CHAIRMAN. Why?

Mr. CULLINANE. I was not supposed to do it. I was not supposed to do that. They were there for treatment, and not to be abused.

The ACTING CHAIRMAN. Did you say that the other attendants did not knock anybody down?

Mr. CULLINANE. Yes.

The ACTING CHAIRMAN. Would you have tolerated any such thing?

Mr. CULLINANE. No, sir; I would not.

The ACTING CHAIRMAN. Why?

Mr. CULLINANE. I was not there for that. My superior officers wanted me to notify them if anything went wrong, and I always did that.

The ACTING CHAIRMAN. In other wards did you see any such thing as I have been asking you about?

Mr. CULLINANE. No, sir; I didn't go through the other wards very much. I always attended to my own business in the ward I was assigned to.

The ACTING CHAIRMAN. How old are you?

Mr. CULLINANE. Thirty-three.

The ACTING CHAIRMAN. How was the food there?

Mr. CULLINANE. Well, right good.

The ACTING CHAIRMAN. Did you ever see any restraint by towel-ing?

Mr. CULLINANE. No, sir.

The ACTING CHAIRMAN. Did you ever see the board of visitors out there?

Mr. CULLINANE. Oh, yes.

The ACTING CHAIRMAN. Frequently or otherwise?

Mr. CULLINANE. I have seen them there once a month. That is about all they are supposed to go there, I believe.

The ACTING CHAIRMAN. Did they go through your ward?

Mr. CULLINANE. Yes.

The ACTING CHAIRMAN. Frequently or otherwise?

Mr. CULLINANE. Well, they didn't go through there all the time

once a month. The place is so large that they couldn't get through the whole place in one day, I don't think.

The ACTING CHAIRMAN. What would Doctor White or the physicians there do by way of visiting the ward you were in?

Mr. CULLINANE. There was a physician went through there every day, at least once a day.

The ACTING CHAIRMAN. Doctor White would not go that often, would he?

Mr. CULLINANE. No.

The ACTING CHAIRMAN. How frequently would he go?

Mr. CULLINANE. I have generally seen him go through there on Sundays.

The ACTING CHAIRMAN. But you had some doctor through there every day?

Mr. CULLINANE. Yes, sir.

The ACTING CHAIRMAN. What were your hours for work?

Mr. CULLINANE. From 6 o'clock in the morning until 8 o'clock at night.

The ACTING CHAIRMAN. Every day?

Mr. CULLINANE. Every other day—from 6 until 6 the next day. In fact, you were there all the time. You had to stay in the ward then, when you got off.

The ACTING CHAIRMAN. Did you room in the ward?

Mr. CULLINANE. Yes, sir.

The ACTING CHAIRMAN. Would you have to do night work sometimes?

Mr. CULLINANE. No; not ordinarily. They had night attendants there.

Mr. HAY. When did you leave there?

Mr. CULLINANE. Two years ago last March.

Mr. HAY. Did you resign, or were you discharged?

Mr. CULLINANE. I was discharged.

TESTIMONY OF ALBERT BALL.

ALBERT BALL, being duly sworn, was examined and testified as follows:

The ACTING CHAIRMAN. What is your name?

Mr. BALL. Albert Ball.

The ACTING CHAIRMAN. How old are you?

Mr. BALL. Thirty-one in June.

The ACTING CHAIRMAN. Where do you live?

Mr. BALL. 24 Franklin street, Anacostia.

The ACTING CHAIRMAN. Were you ever employed out at St. Elizabeth's?

Mr. BALL. Yes, sir; I am employed there now—do you say out of St. Elizabeth's?

The ACTING CHAIRMAN. I say, at the hospital.

Mr. BALL. Yes; I am employed there now.

The ACTING CHAIRMAN. How long have you been employed there?

Mr. BALL. Thirteen years the 24th of last December.

The ACTING CHAIRMAN. What is your present employment?

Mr. BALL. Cook.

The ACTING CHAIRMAN. How long have you been a cook?

Mr. BALL. Eight years in June, to the best of my knowledge.

The ACTING CHAIRMAN. You were there under Doctor Godding, Doctor Richardson, and Doctor White?

Mr. BALL. Yes, sir.

The ACTING CHAIRMAN. Have you been a cook the whole time since Doctor White has been superintendent?

Mr. BALL. Yes, sir.

The ACTING CHAIRMAN. Who assists you in the culinary department?

Mr. BALL. In the cooking?

The ACTING CHAIRMAN. Yes.

Mr. BALL. Why, James H. Sales and Richard Cook is the cooks with me.

The ACTING CHAIRMAN. Who is the head cook?

Mr. BALL. James H. Sales.

The ACTING CHAIRMAN. Did you learn to cook out there; or were you a cook before?

Mr. BALL. I learned out there.

The ACTING CHAIRMAN. What kind of a cook are you?

Mr. BALL. Well, in my class I guess I am pretty good. (Laughter.)

The ACTING CHAIRMAN. For how many people do they cook, in the department you are in?

Mr. BALL. I judge 1,200; I don't exactly know.

The ACTING CHAIRMAN. I am asking for your best judgment.

Mr. BALL. To my best judgment it is 1,200.

Mr. HAY. Three men cook for 1,200?

The ACTING CHAIRMAN. How many men are there who do the cooking for 1,200?

Mr. BALL. Three.

The ACTING CHAIRMAN. Have you other assistants?

Mr. BALL. We have such as helpers, you know, to lend a hand at different things.

Mr. HAY. How many helpers?

The ACTING CHAIRMAN. Yes; how many helpers?

Mr. BALL. I judge 20, the kitchen through—all through.

The ACTING CHAIRMAN. In the cooking of your food, first, what kind of stuff do you get to cook?

Mr. BALL. Well, the quality is not very good, generally.

The ACTING CHAIRMAN. What is wrong with it?

Mr. BALL. Well, we have a class of goods, such as rice, and hominy, and beans, shoulders, corned beef, sausage, and so on.

The ACTING CHAIRMAN. Where do you get your hominy? Do you know where that is bought?

Mr. BALL. No, sir; I don't know where it is bought.

The ACTING CHAIRMAN. Do you know where your beans are bought?

Mr. BALL. No, sir.

The ACTING CHAIRMAN. Do you know where any of the stuff that you have to cook there comes from?

Mr. BALL. Well, only by the wagons that I see come up there.

The ACTING CHAIRMAN. Judging from the wagons—whose wagons are they?

Mr. BALL. I have seen Mr. Hume's and Mr. Earnshaw's and Golden and Love's.

The ACTING CHAIRMAN. How are your meats out there?

Mr. BALL. Well, tolerably fair, I suppose, to the best of my knowledge.

The ACTING CHAIRMAN. In preparing what is furnished you to cook, how is it done? Is it done in a haphazard way or do it—

Mr. BALL. We try to do the best we can, as far as that is concerned. We try to do the best we can in the cooking.

The ACTING CHAIRMAN. These helpers, are they patients?

Mr. BALL. Well, a few of the helpers around the kitchen are patients—perhaps two or three—but none of those I mentioned.

The ACTING CHAIRMAN. They are outside of the twenty?

Mr. BALL. Yes, sir; they have nothing to do with the cooking. They might wash dishes or something like that, you know.

The ACTING CHAIRMAN. In getting the food distributed to the different wards how do you distribute it, and what care do you take, if any, to get it out?

Mr. BALL. We dish it in square boxes—not exactly square, but tin boxes—and we send it to the wards in that way, except that the soups and coffee go in cans holding about four gallons, I presume.

The ACTING CHAIRMAN. Do you try to get it out warm?

Mr. BALL. We certainly do.

The ACTING CHAIRMAN. You do not follow the food to the dining room?

Mr. BALL. No, sir.

The ACTING CHAIRMAN. Who does follow it to the dining room; the attendants who get it ready?

Mr. BALL. The truck men or car men follow it to the dining room, and then the dining-room men take it in charge.

The ACTING CHAIRMAN. What kind of butter do you get out there?

Mr. BALL. Very poor, in my estimation.

The ACTING CHAIRMAN. Is it butter or oleomargarine?

Mr. BALL. It is margarine.

The ACTING CHAIRMAN. What kind of milk do you get?

Mr. BALL. Oh, we have good milk.

The ACTING CHAIRMAN. Where does it come from? Do you know?

Mr. BALL. From the barn, and Mr. Fisher hauls 20 gallons—to the best of my knowledge it is 20 gallons.

Mr. HAY. When you say the barn you mean what?

Mr. BALL. The hospital.

Mr. HAY. You mean it comes from a herd of cows owned by the hospital?

Mr. BALL. Yes, sir.

The ACTING CHAIRMAN. Do you know anything about the treatment of patients out there since Doctor White has been there?

Mr. BALL. No, sir; I have nothing to do with that.

The ACTING CHAIRMAN. Could that food be improved out there?

Mr. BALL. Well, yes, sir; it could be improved, I suppose.

The ACTING CHAIRMAN. Do you get corned beef there?

Mr. BALL. Yes, sir; we get corned beef. One week we have it twice and the next week we have it once.

The ACTING CHAIRMAN. Is it the ordinary corned beef that is already prepared?

Mr. BALL. Yes, sir; it comes there prepared to cook.

The ACTING CHAIRMAN. Do you know where it is prepared?

Mr. BALL. No, sir; I do not.

The ACTING CHAIRMAN. The beans; do you use prepared beans?

Mr. BALL. We use the Army and Navy beans for baked beans.

The ACTING CHAIRMAN. Do you have any fruits?

Mr. BALL. Only in season, in fruit season. We haven't had any fruit for a good long time before Christmas, I observed.

The ACTING CHAIRMAN. Do you get any apples out there?

Mr. BALL. No, sir; we haven't had any apples this past winter, to my knowledge.

The ACTING CHAIRMAN. Tomatoes; do you get tomatoes?

Mr. BALL. Canned, you mean?

The ACTING CHAIRMAN. Both ways.

Mr. BALL. We don't get any, only canned, and we don't get many of them.

The ACTING CHAIRMAN. You do not get enough?

Mr. BALL. No; our tomatoes we have run pretty short of, here of late.

The ACTING CHAIRMAN. Do you not make complaints to the people in charge there if you have not stuff enough?

Mr. BALL. Well, yes; I have.

The ACTING CHAIRMAN. Whom have you complained to?

Mr. BALL. To Mrs. Mulligan and Miss O'Leary.

The ACTING CHAIRMAN. Who is Mrs. Mulligan?

Mr. BALL. Well, she is, I presume, the lady of the kitchen. She was appointed by Doctor White, I understand.

Mr. HAY. Do you mean by that that she has charge of the kitchen?

Mr. BALL. Yes, sir.

Mr. HAY. In giving out supplies?

Mr. BALL. In giving out supplies. She tells us what to cook, and gives us what is necessary to cook.

The ACTING CHAIRMAN. Did you make a complaint to her both as to the quality and the quantity of what was furnished you to cook?

Mr. BALL. How did I make it?

The ACTING CHAIRMAN. Did you make complaint to her?

Mr. BALL. I didn't make complaint about the quality. I have nothing to do with that. I have to cook what she gives me; but I would tell her there was not enough, and she will say "That is all."

The ACTING CHAIRMAN. If there was complaint to be made about the quality, why did you not do that? Were you afraid?

Mr. BALL. Well, it doesn't do to talk to the bosses too much. [Laughter.]

The ACTING CHAIRMAN. They sort of padlock you people out there, do they not?

Mr. BALL. Well, kind of; yes.

The ACTING CHAIRMAN. Is that the result of the civil service, do you know?

Mr. BALL. Well, no; I don't.

The ACTING CHAIRMAN. Are you under the civil service?

Mr. BALL. No; I was never under the civil service. It had not reached St. Elizabeth's when I got there.

The ACTING CHAIRMAN. Oh, it had not. [Laughter.] You beat it in the race.

Mr. BALL. I beat it.

Mr. HAY. Mr. Ball, as to the quantity of food there, do you mean to say that they do not cook enough food for these people?

Mr. BALL. Do I mean to say which?

Mr. HAY. That they do not cook sufficient food for these people?

Mr. BALL. Oh, yes; we cook sufficient.

Mr. HAY. When you say they have not enough, what do you mean; do you mean of a particular kind of food?

Mr. BALL. Yes; a particular kind of food. If we haven't enough tomatoes, we have to use a substitute. If we haven't enough rice, or hominy, we use a substitute.

Mr. HAY. What do you use as a substitute?

Mr. BALL. Whatever we can get.

Mr. HAY. What do you substitute for tomatoes?

Mr. BALL. Well, perhaps we would substitute rice, rice cakes, or anything we could get, you know. It is hard to tell, when a man is cooking, what he will substitute.

Mr. HAY. Yes; it is an art, isn't it? How often do Doctor White and the other people in charge go down to the place where you are employed and oversee, see what you are doing there?

Mr. BALL. Doctor White has not been through the kitchen, to my knowledge, for one year last Christmas. Now, I have not saw him.

Mr. HAY. Have you seen anybody else?

Mr. BALL. Do you mean the board of visitors?

Mr. HAY. The board of visitors, or—

Mr. BALL. I couldn't tell the day when I saw the board of visitors. It has been probably two years. I couldn't say.

Mr. HAY. Is there anybody who has particular charge of the kitchens, whose business it is to inspect the food?

Mr. BALL. Yes, sir.

Mr. HAY. Who is that man?

Mr. BALL. It is a lady, Miss Mary O'Leary.

Mr. HAY. Is it her business to inspect the food for the whole institution?

Mr. BALL. It is, as far as I know.

Mr. HAY. How often does she come around?

Mr. BALL. She comes around pretty often.

Mr. HAY. How often?

Mr. BALL. I will say—well, the main kitchen is where I work. She is in there, I will say, eight to ten times a day.

Mr. HAY. So that she exercises a strict supervision over the food?

Mr. BALL. Yes. Then she makes her rounds through the other kitchens all around the house.

Mr. HAY. How long has she been there?

Mr. BALL. I couldn't tell you that, now. She was there when I went there.

Mr. HAY. She was there when you went there?

Mr. BALL. Oh, yes.

Mr. HAY. Do you think you have sufficient help in the kitchen?

Mr. BALL. No, sir. When any of the help is out, such as vacations or sick or anything of that kind, we have to double up. There is

three cooks of us, and when one man is absent or excused or on his vacation we have to double up, and then it is pretty hard.

Mr. HAY. You mean that two have to do what three had to do before?

Mr. BALL. Yes, sir; we have to get somebody to give us a lift, and lend a hand, but nobody is appointed to help us out.

Mr. WALLACE. Is the food that is sent out from your kitchen to the patients and to the attendants, the supervisors, and everybody else there of the same character and kind?

Mr. BALL. Yes, sir.

Mr. WALLACE. The same character, to everybody alike?

Mr. BALL. No, sir.

Mr. WALLACE. What is the difference in it?

Mr. BALL. It would be pretty hard to explain the whole difference, but the employees get the best end of the doubt, and the supervisors are above them.

Mr. WALLACE. And who is below?

Mr. BALL. The patients.

Mr. WALLACE. The patients are below?

Mr. BALL. Yes.

Mr. WALLACE. They are at the bottom?

Mr. BALL. Yes, sir.

Mr. WALLACE. Is there any fault found with your cookery out there?

Mr. BALL. Yes; the boys find fault sometimes, but that is done everywhere, I suppose. You hear somebody make a remark that it is not done properly, or something of that kind.

The ACTING CHAIRMAN. What sort of coffee have you got out there?

Mr. BALL. I have nothing to do with the coffee. The fireman makes that.

Mr. HAY. The who?

Mr. BALL. The fireman, Mr. Gatling.

Mr. HAY. He is a cook, is he not?

Mr. BALL. No; that comes under his line of duty, to make the coffee.

Mr. HAY. What sort of a fireman do you mean?

Mr. BALL. Well, around the kitchen, you know. He has the bake oven, and tends the fires in the furnaces.

Mr. HAY. He keeps the fires going and makes the coffee?

Mr. BALL. He keeps the fires going and makes the coffee.

The ACTING CHAIRMAN. Do you know where this milk goes? Does it go to all the patients, or is it only in certain wards?

Mr. BALL. No; I don't send out the milk.

The ACTING CHAIRMAN. You do not send out the milk?

Mr. BALL. No, sir; I don't have to send out the milk.

The ACTING CHAIRMAN. What is the character of the food you are getting now as compared with what it was four months ago?

Mr. BALL. Four months ago?

The ACTING CHAIRMAN. Yes.

Mr. BALL. Well, I presume it is about as good as it was four months ago.

The ACTING CHAIRMAN. How?

Mr. BALL. I presume the food we get now is as good as it was four months ago.

The ACTING CHAIRMAN. Is it not better?

Mr. BALL. No; I don't see where it is any better.

The ACTING CHAIRMAN. Did you ever cook a meal for the board of visitors?

Mr. BALL. No, sir.

Mr. HAY. How many kitchens are there altogether?

Mr. BALL. Ten, with the superintendent's and physician's kitchen.

Mr. BARCHFELD. Did you ever cook in any other institution outside of this one?

Mr. BALL. No, sir.

Mr. BARCHFELD. You do not know anything about cooking at other institutions?

Mr. BALL. No, sir.

Mr. BARCHFELD. You know it is customary in all institutions to have separate cooking for the officers and the working head of the institution, as compared with the inmates or patients?

Mr. BALL. Yes, sir.

Mr. BARCHFELD. So this institution is not any different from any other in that respect?

Mr. HAY. You could not cook for all the inmates and employees and everybody out there in the same kitchen?

Mr. BALL. No, sir; it is not large enough.

Mr. HAY. You could not do that; that would be impossible, would it not?

Mr. BALL. Yes, sir.

TESTIMONY OF ARTHUR NABORS.

ARTHUR NABORS, being duly sworn, was examined, and testified as follows:

The ACTING CHAIRMAN. What is your name?

Mr. NABORS. Arthur S. Nabors.

The ACTING CHAIRMAN. Where do you live?

Mr. NABORS. I live at Congress Heights, D. C.

The ACTING CHAIRMAN. How old are you?

Mr. NABORS. Twenty-nine years old.

The ACTING CHAIRMAN. Are you an employee out at the hospital?

Mr. NABORS. I am, sir.

The ACTING CHAIRMAN. How long have you been there?

Mr. NABORS. Eight years the second day of last March.

The ACTING CHAIRMAN. At present what is your employment?

Mr. NABORS. As an attendant in charge of a ward.

The ACTING CHAIRMAN. What ward?

Mr. NABORS. The N building.

The ACTING CHAIRMAN. How long have you been an attendant in that ward?

Mr. NABORS. It will be two years the 1st of August.

The ACTING CHAIRMAN. Where were you before that?

Mr. NABORS. Oaks D, the old ground, on the old building.

The ACTING CHAIRMAN. As an attendant?

Mr. NABORS. Yes, sir.

The ACTING CHAIRMAN. What is the character of the patients that you have charge of now?

Mr. NABORS. Chronic cases—a lot of the patients that I have. Some are old men and some are young, but they are all chronic cases.

The ACTING CHAIRMAN. Are they violent or otherwise?

Mr. NABORS. We have several violent men, but as a general thing most of them are a very good class of patients.

The ACTING CHAIRMAN. Who are your associate attendants?

Mr. NABORS. T. A. Chinn and John F. Yancey.

The ACTING CHAIRMAN. Who is supervisor?

Mr. NABORS. I am in charge of the ward.

The ACTING CHAIRMAN. Have you been for two years?

Mr. NABORS. Yes, sir.

The ACTING CHAIRMAN. How do you treat your patients?

Mr. NABORS. I treat them all right, sir. We treat them the very best we can.

The ACTING CHAIRMAN. How do the other attendants treat them?

Mr. NABORS. They do the same.

The ACTING CHAIRMAN. Do you ever jacket any of them?

Mr. NABORS. Yes, sir.

The ACTING CHAIRMAN. What for?

Mr. NABORS. For being violent, breaking up things, and fighting they are put in a strait-jacket.

The ACTING CHAIRMAN. What do you do that for?

Mr. NABORS. We do that to keep them from injuring themselves or anyone else about the ward.

Mr. HAY. When you say a strait-jacket, what do you mean?

Mr. NABORS. A strait-jacket would be made on the order of this coat [indicating] if this coat was put on and buttoned in the back, except that where there is buttons here it laces with a small rope and the sleeves run out to a point—that is, they are about 4 or 5 feet long, and run up to a point and fasten at the ends. They are carried through a little slit made in the front part of this coat in this manner [indicating], and they are carried behind and tied. The man carries his arms in this position [indicating].

Mr. HAY. What is the material of which it is made?

Mr. NABORS. Canvas.

The ACTING CHAIRMAN. Is that what they call a camisole?

Mr. NABORS. We call it a strait-jacket.

The ACTING CHAIRMAN. Is it put on for any other purpose than to restrain the patients from doing damage?

Mr. NABORS. No, sir.

The ACTING CHAIRMAN. In putting them on—you have helped to put them on yourself?

Mr. NABORS. Yes, sir.

The ACTING CHAIRMAN. Did you put any on when you thought it was not proper to be put on?

Mr. NABORS. I never put any on without an order from the supervisor or doctor in charge of the building.

The ACTING CHAIRMAN. In putting them on would you do it in a rough, violent manner?

Mr. NABORS. We had to put them on in the best manner possible, and handled the men as easily as possible in putting the jacket on.

The ACTING CHAIRMAN. Did you ever knock anybody down in your ward?

Mr. NABORS. No, sir.

The ACTING CHAIRMAN. Did you ever see it done?

Mr. NABORS. No, sir.

The ACTING CHAIRMAN. Did you ever see them kicked or cuffed?

Mr. NABORS. No, sir.

The ACTING CHAIRMAN. Or struck or slapped?

Mr. NABORS. No, sir.

The ACTING CHAIRMAN. Or beaten in any way?

Mr. NABORS. No, sir.

The ACTING CHAIRMAN. Are you sure of that?

Mr. NABORS. Yes, sir.

The ACTING CHAIRMAN. Would you tolerate it?

Mr. NABORS. No, sir; I would not.

The ACTING CHAIRMAN. Why?

Mr. NABORS. I would think it was my duty to report it to the officials in charge.

The ACTING CHAIRMAN. Did you ever have occasion to report it?

Mr. NABORS. No, sir; I have not.

The ACTING CHAIRMAN. Did you ever see that done in any other ward?

Mr. NABORS. No, sir.

Mr. HAY. How long were these strait-jackets kept on?

Mr. NABORS. They were put on after breakfast and kept on until about 11 o'clock. For the dinner hour they were taken off, and the patient was allowed to go to his meals, and also to go until about 1 o'clock, to give him time to eat and after his dinner to attend to anything he wanted to attend to, and then it was put back on about 1 o'clock and left on him until supper, which is about 4 o'clock. Then the patient was allowed to go to supper, and after supper it was not put on any more during the night.

Mr. BARCHFELD. You never knew of a strait-jacket being kept on a patient in your ward for twenty-four hours at a time?

Mr. NABORS. No, sir.

Mr. BARCHFELD. You never knew it to be kept on twelve hours at one time?

Mr. NABORS. No, sir.

Mr. HAY. Mr. Nabors, have you everything in the ward that you ought to have for the treatment and care of these people?

Mr. NABORS. Yes, sir; for the class of patients I have, I have everything.

Mr. HAY. Everything you need?

Mr. NABORS. Yes, sir.

Mr. HAY. Have you known of a patient being tied to his bed or anything of that sort?

Mr. NABORS. No, sir. In asking me these questions, you want to know about in Doctor White's time?

Mr. HAY. Yes.

Mr. NABORS. I have been there eight years.

Mr. HAY. We have reference only to Doctor White's time.

Mr. NABORS. I have had charge of different wards and different classes of men, but with this class I have now under Doctor White I have had nobody tied in bed; no, sir.

Mr. HAY. What are your hours of work?

Mr. NABORS. One day I worked twelve, and the next day I worked fourteen hours—every other evening, fourteen hours—from six to eight o'clock.

Mr. HAY. One day you worked twelve hours and one day fourteen hours?

Mr. NABORS. Yes.

Mr. HAY. How often does Doctor White come through your ward?

Mr. NABORS. He has been in my ward three times.

Mr. HAY. Since you have been on duty?

Mr. NABORS. Yes.

Mr. HAY. How long has that been?

Mr. NABORS. About three years.

Mr. HAY. How often has the board of visitors been there?

Mr. NABORS. I have never seen the board of visitors in my ward.

Mr. HAY. Are you required to perform any other duties except those of an attendant?

Mr. NABORS. Yes, sir.

Mr. HAY. What?

Mr. NABORS. I have a lawn to mow in front of our building. I am sent out to mow the lawn; and as the rate has diminished, our barber has left us, and now I have all the shaving and hair cutting and beard trimming to do, and I am no barber.

The ACTING CHAIRMAN. Will not the Civil Service Commission give you a hair cutter?

Mr. NABORS. We would be afraid to tackle that. We are not allowed to ask for anything over there. You know the President has prohibited us from applying for any help.

Mr. HAY. You can ask the superintendent, can you not?

Mr. NABORS. We have asked for better conditions, but we have not got them.

Mr. HAY. You have asked?

Mr. NABORS. Yes.

Mr. HAY. What do you think you ought to have?

Mr. NABORS. We ought to have more men; we ought to have more money; we ought to have shorter hours; we ought to have a better class of employees. With the conditions that exist at the hospital at the present time, the small pay, the long hours' work, and the little time we get off duty, it draws a class of men to the hospital that are not suitable to take care of insane men. We have boys coming in now, nothing more than youths, and they are not suitable to attend to people in that condition over at the hospital. No man is going there under the conditions that would take good care of those people at the present time.

The ACTING CHAIRMAN. What wages do you get?

Mr. NABORS. I am now drawing \$40. I have a family to support, and I have a hard time to live.

Mr. HAY. These other duties that you speak of having to perform, they are performed, I suppose, in the hours you are off duty?

Mr. NABORS. Yes, sir.

Mr. HAY. What has been your observation as to the length of time that an employee stays there during the last three years?

Mr. NABORS. It is a regular immigration there. People are coming and going all the time. I couldn't state how many have left, or how

many have been there, or anything about it, but it is a regular immigration of people all the time.

Mr. BARCHFELD. Have the wages of all the attendants in your department been raised under Doctor White's administration?

Mr. NABORS. Not at all. I have had an increase of \$5 under Doctor White. I was getting \$35, and Doctor White has given me \$40.

Mr. BARCHFELD. Have the men associated with you in the same ward had an increase in the same time?

Mr. NABORS. No, sir; they have not.

The ACTING CHAIRMAN. You do not believe that boys ought to be put in there, or employed there as attendants, do you?

Mr. NABORS. No, sir; I do not think it is suitable. A boy is a boy always.

The ACTING CHAIRMAN. And, of course, under the civil-service rules you wouldn't dare go to the Civil Service Commission and suggest, would you?

Mr. NABORS. No, sir.

The ACTING CHAIRMAN. Would something happen to you?

Mr. NABORS. I would be rather afraid of being put out, probably.

The ACTING CHAIRMAN. Are we under the civil service?

Mr. BARCHFELD. We are under the most stringent civil service on earth. We are under civil service. Members of Congress are certainly under civil service. We have to pass our examinations. We have to appear before the people every two years, and if we do not make good we are dropped.

Mr. SMYSER. I think the reporter may note that Doctor Barchfeld voices the sentiment of the committee.

Mr. HAY. And that we are not afraid to go before our civil service.

TESTIMONY OF C. J. HARBAUGH.

C. J. HARBAUGH, being duly sworn, was examined and testified as follows:

The ACTING CHAIRMAN. What is your name?

Mr. HARBAUGH. C. J. Harbaugh.

The ACTING CHAIRMAN. Are you an employee out at St. Elizabeth's?

Mr. HARBAUGH. Yes, sir.

The ACTING CHAIRMAN. How long have you been there?

Mr. HARBAUGH. The second day of this coming July will be sixteen years.

The ACTING CHAIRMAN. So you were there under Doctors Godding, Richardson, and White?

Mr. HARBAUGH. Yes, sir.

The ACTING CHAIRMAN. How old are you?

Mr. HARBAUGH. I am going on 36.

The ACTING CHAIRMAN. You were there at 20 years of age, then?

Mr. HARBAUGH. Near about that; yes, sir.

The ACTING CHAIRMAN. What is your present employment?

Mr. HARBAUGH. Well, I am employed there as an attendant or nurse rather, as they call it.

The ACTING CHAIRMAN. In what ward?

Mr. HARBAUGH. In the R building.

The ACTING CHAIRMAN. Who are your associate attendants?

Mr. HARBAUGH. On the present ward?

The ACTING CHAIRMAN. Yes.

Mr. HARBAUGH. Why, Mr. Readmond, Mr. Davis, and Mr. Readmond's brother.

The ACTING CHAIRMAN. There are four of you?

Mr. HARBAUGH. But in the present employment I have been acting as assistant supervisor—acting only.

The ACTING CHAIRMAN. Who is supervisor?

Mr. HARBAUGH. Mr. Carter.

The ACTING CHAIRMAN. And you are assistant supervisor. Who are the attendants? The persons you have named?

Mr. HARBAUGH. Those are in the ward that I am assigned to.

The ACTING CHAIRMAN. That is what I mean. How many patients have you in that ward?

Mr. HARBAUGH. Thirty-six.

The ACTING CHAIRMAN. What is the character of the patients?

Mr. HARBAUGH. Well, it is rather a mixed lot. The majority of them are in bed—helpless old soldiers.

The ACTING CHAIRMAN. So it requires more nursing than anything else; is that it?

Mr. HARBAUGH. That is it. It would be safe to say that, that it requires more nursing than anything else.

The ACTING CHAIRMAN. How long have you been in that particular ward?

Mr. HARBAUGH. Well, I have not been in this ward, only to see after it; of course, I am assigned to it, but in reality I am doing duty at another place.

The ACTING CHAIRMAN. What other place?

Mr. HARBAUGH. As acting assistant supervisor.

Mr. HAY. At what place?

Mr. HARBAUGH. I am assigned to the ward; but I am not on the ward. I am employed as acting assistant supervisor.

The ACTING CHAIRMAN. Although you are actually assigned to this ward?

Mr. HARBAUGH. To this ward.

The ACTING CHAIRMAN. What are your duties as assistant supervisor?

Mr. HARBAUGH. They are going around to see after the other employees to a certain extent, and the patients.

The ACTING CHAIRMAN. Do you do that?

Mr. HARBAUGH. Yes, sir.

The ACTING CHAIRMAN. How frequently do you go around?

Mr. HARBAUGH. I usually go around as many times as it is possible to get around, you might say—every meal time.

The ACTING CHAIRMAN. How many wards do you visit by way of supervision?

Mr. HARBAUGH. Ten.

The ACTING CHAIRMAN. Are you on the go all the time?

Mr. HARBAUGH. Well, I am on the go somewheres or other. What I mean is I don't have any time to loiter around.

The ACTING CHAIRMAN. How are the patients treated there?

Mr. HARBAUGH. Well, they are treated, I suppose, about as well as the circumstances will permit.

The ACTING CHAIRMAN. What is wrong with the circumstances?

Mr. HARBAUGH. Well, I would say that there was not enough of help, for one thing.

The ACTING CHAIRMAN. Why?

Mr. HARBAUGH. Well, I don't know why it is. I couldn't say that.

The ACTING CHAIRMAN. How would more help avail you or aid you out there?

Mr. HARBAUGH. Well, it would enable a man to do his duty well, or he would get done, in other words. As it is he don't get done. He works all day, and what aint done, of course, remains undone. That is the way it would help us.

The ACTING CHAIRMAN. By way of cruel treatment, how are the patients treated, if they are treated cruelly?

Mr. HARBAUGH. Well, in speaking for that, across the road there, at the place I am at, I will say the patients are treated very good, as far as I know.

The ACTING CHAIRMAN. Did you ever observe any misconduct toward the patients by the attendants?

Mr. HARBAUGH. Well, there was two instances, where the men were discharged. I didn't observe. I just have it from hearsay.

The ACTING CHAIRMAN. Who were they?

Mr. HARBAUGH. They were discharged for mistreating patients.

The ACTING CHAIRMAN. Who were they?

Mr. HARBAUGH. Wilson was one, and Hodges was the other.

The ACTING CHAIRMAN. Have you, yourself, since Doctor White has been there, ever observed any cruel treatment?

Mr. HARBAUGH. No, sir; I couldn't say that I did.

The ACTING CHAIRMAN. In any of these wards that you visit?

Mr. HARBAUGH. No, sir; I couldn't say that I did. I never saw it.

The ACTING CHAIRMAN. Have you seen people in jackets?

Mr. HARBAUGH. Oh, yes; I have saw people restrained.

The ACTING CHAIRMAN. In a resting sheet?

Mr. HARBAUGH. Yes, sir.

The ACTING CHAIRMAN. What was that for?

Mr. HARBAUGH. Well, that is claimed to be done for their own good. I have no reason to believe that it is not so. They have to be restrained, either for molesting other patients or trying to injure themselves.

The ACTING CHAIRMAN. You start in at work at what time?

Mr. HARBAUGH. Well, I start in a little before 6 o'clock in the morning.

The ACTING CHAIRMAN. And you quit when?

Mr. HARBAUGH. I quit usually at 9 o'clock, or a quarter to 9.

The ACTING CHAIRMAN. When you start where do you go first?

Mr. HARBAUGH. On my duties?

The ACTING CHAIRMAN. Yes.

Mr. HARBAUGH. I take up the reports, the morning reports, and carry them up to the office and give them to Mr. Carter.

The ACTING CHAIRMAN. That is, what has happened during the night?

Mr. HARBAUGH. Well, that is for the twelve hours preceding it.

The ACTING CHAIRMAN. After you do that what do you do by way of going around?

Mr. HARBAUGH. Then I go around in the different dining rooms and see whether there is enough food for the patients and get the

report of the men in the dining rooms, whether there was enough or not.

The ACTING CHAIRMAN. After you have got that done what do you do?

Mr. HARBAUGH. Well, I eat my breakfast next thing. It is about breakfast time then. Then there is always miscellaneous things to do. They vary from day to day. There is orders to be taken over to the other side, for repair work, and one thing and another—lots of things. I could hardly enumerate them all now.

The ACTING CHAIRMAN. When you have got that all done, when do you begin your rounds, by way of observing what is going on in the different wards?

Mr. HARBAUGH. Well, it is possible that I could make a round in the morning, between breakfast and dinner time.

The ACTING CHAIRMAN. Well, do you?

Mr. HARBAUGH. Not always. I haven't got the time sometimes to do it.

The ACTING CHAIRMAN. When you have the time do you visit these ten wards?

Mr. HARBAUGH. Yes, sir; I go through the wards; yes, sir.

The ACTING CHAIRMAN. How critical is your inspection?

Mr. HARBAUGH. Well, coming to that point of it—

The ACTING CHAIRMAN. Do you just walk through?

Mr. HARBAUGH. I don't interview every patient or anything like that. I mostly interview the attendants.

The ACTING CHAIRMAN. You use your eyesight, though, do you not, to see what is going on?

Mr. HARBAUGH. Oh, yes, yes; I do that, but then, of course, I take the word of the attendants in charge. I take their word for what is what.

The ACTING CHAIRMAN. Certainly. Do you mean to say that in going around in the discharge of your duties, as you have described there, you have seen nothing by way of cruel treatment of patients?

Mr. HARBAUGH. I can safely say that. I have not saw it.

The ACTING CHAIRMAN. Have instances come to your notice that you have reported?

Mr. HARBAUGH. All instances that I have saw.

The ACTING CHAIRMAN. Did you see some?

Mr. HARBAUGH. Well, what I mean is this: If I had of saw them, of course I would report them. That is what I mean to say.

The ACTING CHAIRMAN. In going around did you ever see any evidences of cruel treatment?

Mr. HARBAUGH. Cruel treatment?

The ACTING CHAIRMAN. Such as black eyes or anything of that kind?

Mr. HARBAUGH. Oh, I have saw black eyes and cut heads and things of that kind.

The ACTING CHAIRMAN. What is that?

Mr. HARBAUGH. I have saw that often. I have saw evidences and I have seen the wounds themselves, but there was reports made out to me that other patients had done it.

The ACTING CHAIRMAN. Did you take any means to ascertain if the report was true or not?

Mr. HARBAUGH. Well, that is not really my duty, to judge on a case of that kind. That is always reported to the doctor in charge, Doctor Logie. He investigates them cases.

The ACTING CHAIRMAN. Did those reports go to Doctor Logie, do you know?

Mr. HARBAUGH. All that ever I saw did.

The ACTING CHAIRMAN. And your duty ended with that report, is that it?

Mr. HARBAUGH. That is all I have to do in the matter, is to report to him what I observe.

The ACTING CHAIRMAN. From your observation there, could there be an improvement in this treatment of these patients?

Mr. HARBAUGH. Well, that is rather a difficult question. I am not able to say, but there could, no doubt, be improvement in some little things.

The ACTING CHAIRMAN. Name some of them, will you?

Mr. HARBAUGH. Some of them requires, as you know, probably, more attention than others, and sometimes according to my notion there is not enough employees to take care of the patients and meet all the emergencies. It might be all right along a regular routine, but when an emergency arises you have to meet it.

The ACTING CHAIRMAN. You do the best you can with the help you have; is that it?

Mr. HARBAUGH. Yes.

The ACTING CHAIRMAN. Boys make pretty good attendants? Boys from 18 to 20 or 21 years of age make pretty good attendants, do they not?

Mr. HARBAUGH. Some of them do and some of them don't.

The ACTING CHAIRMAN. If you were the Civil Service Commission, would you certify boys 20 years old for duty there?

Mr. HARBAUGH. My own individual experience is—

The ACTING CHAIRMAN. In answering that question don't you think about the Civil Service Commission; you put that up to me.

Mr. HARBAUGH. Answering your question, my own individual opinion is that a man should be of a certain age before he is employed there. He ought to know how to take care of himself before he takes care of others. You would naturally suppose that.

The ACTING CHAIRMAN. That is your idea, is it; that he ought to be old enough to have learned to govern himself first?

Mr. HARBAUGH. Well, if he is to be an attendant I should think so.

The ACTING CHAIRMAN. He ought to know how to control his temper?

Mr. HARBAUGH. Yes; that is very necessary in this business—very necessary.

Mr. HAY. Mr. Harbaugh, how often did Doctor White go through those wards, as far as you know?

Mr. HARBAUGH. Doctor White, maybe, went through there when I wasn't there, but to my knowledge he has been through there four times.

Mr. HAY. He has been through how many times, four times?

Mr. HARBAUGH. Yes, sir. Now, he may have been through there and I didn't know it.

Mr. HAY. I understand that.

Mr. HARBAUGH. I am only speaking of what I observed.

Mr. HAY. You have been there all the time since he has been there, have you not?

Mr. HARBAUGH. Yes, sir.

Mr. HAY. You have been there sixteen years, and was there when he came, and you are there now?

Mr. HARBAUGH. Yes, sir.

Mr. HAY. How often did the board of visitors go through there?

Mr. HARBAUGH. Well, I don't think the board of visitors has been through this portion of the institution but once in two years.

Mr. HAY. In two years?

Mr. HARBAUGH. Yes, sir.

Mr. HAY. I do not mean necessarily the whole board, you know. I mean any members of the board.

Mr. HARBAUGH. I think there was two members, if I remember rightly, at a time, and two members this time.

Mr. HAY. So that two members of the board have been through the ward with which you are connected twice, do you say?

Mr. HARBAUGH. Twice; yes, sir.

Mr. HAY. In two years?

Mr. HARBAUGH. That is all I remember of. They were through.

Mr. HAY. Did they inquire as to the character of the food?

Mr. HARBAUGH. I never heard any questions asked by them.

Mr. HAY. What do you know about the food out there?

Mr. HARBAUGH. Well, the food in the Richardson group, as it is called—that is, east of Nichols avenue, that group of buildings—the food is good. There might be a little alteration in some things. There is some complaint sometimes from patients about the butter, the margarine, and not having sugar on the oatmeal, but otherwise I think the quality and quantity is both good.

Mr. HAY. What do you call that group of buildings?

Mr. HARBAUGH. East of Nichols avenue—the Richardson group, named after the late superintendent.

Mr. HAY. Is the food well cooked; is it well prepared?

Mr. HARBAUGH. Well, it is.

Mr. HAY. How many patients in that group get their food?

Mr. HARBAUGH. 371.

Mr. HAY. 371?

Mr. HARBAUGH. Yes, sir.

Mr. HAY. Were you required to perform any other duties except those you have detailed?

Mr. HARBAUGH. Well, in what way do you mean?

Mr. HAY. In any way. You are employed to do a certain thing, are you not, and you have to do that——

Mr. HARBAUGH. Well, I am employed as——

Mr. HAY. Assistant supervisor?

Mr. HARBAUGH. As a nurse.

Mr. HAY. I know, but you have been detailed to this position as assistant supervisor?

Mr. HARBAUGH. To act; yes, sir.

Mr. HAY. And you do not perform any duties outside of those duties, do you? You do not have to cut the lawns, do you, or shave anybody?

Mr. HARBAUGH. Well, I have done a little lawn mowing.

Mr. HAY. You have done lawn mowing?

Mr. HARBAUGH. Yes, sir.

Mr. HAY. Is that a part of the duties for which you are employed?

Mr. HARBAUGH. Well, I would not suppose it was, but we have to do what we are told to do, if we want to stay there.

Mr. HAY. I understand that. I just want to get from you what you do.

The ACTING CHAIRMAN. How many kitchens are there, if you know, for this Richardson group of buildings?

Mr. HARBAUGH. There are two; one in the P building and one in the R building.

The ACTING CHAIRMAN. Is there any separate building for the sick patients?

Mr. HARBAUGH. Well, in the R building, that is the hospital building, they have a special diet there.

Mr. BARCHFELD. That is known as a diet kitchen, is it?

Mr. HARBAUGH. Yes, sir; they have a special diet for that building.

Mr. WALLACE. Have you used the strait-jacket in your position out there?

Mr. HARBAUGH. Oh, yes; I have used strait-jackets.

Mr. WALLACE. Did you have a patient who would constantly tear his clothes, and was it your custom to keep on him, constantly, a restraining jacket; and were you not ordered to remove the restraining jacket upon the publication of charges against the management of the institution?

Mr. HARBAUGH. Well, I was not on—I don't remember; of course I had not that directly to do, you know. The attendant on the ward, that would come under him, whatever ward it was on.

Mr. WALLACE. You do not know that you ever had charge of any such situation?

Mr. HARBAUGH. No, sir; I had no charge of that.

Mr. WALLACE. Do you know, or can you name, the female ward in the institution that had upon it a negro woman who wore such a restraining jacket as a custom, she being considered dangerous, and was not the jacket removed from her against the protest of a frail woman attendant, who was compelled to take care of the ward alone at night?

Mr. HARBAUGH. No, sir; I wouldn't have no means of seeing anything like that.

Mr. WALLACE. You have no knowledge of any such thing as that?

Mr. HARBAUGH. No, sir.

Mr. WALLACE. Was not this restraining jacket removed on orders at the same time you received your orders?

Mr. HARBAUGH. I couldn't say that. I don't know about such matters.

Mr. WALLACE. Nothing of this kind happened according to your knowledge?

Mr. HARBAUGH. I couldn't say that it did. I couldn't knowingly say so.

Mr. WALLACE. About how many attendants have left or been discharged during the past three years; and state the cause of such resignation or discharge.

Mr. HARBAUGH. Not having access to the records there I could not say. I couldn't answer the question. I could name two that have

been discharged in that building. I have named them, and I will do it again—Hodges and Wilson.

Mr. WALLACE. They were attendants?

Mr. HARBAUGH. They were attendants; yes, sir.

Mr. WALLACE. How many attendants should there be in your ward to properly care for the patients?

Mr. HARBAUGH. I would consider that four would be the least in the hospital wards.

Mr. WALLACE. How many have you in there?

Mr. HARBAUGH. In the ward that I had there are three.

Mr. WALLACE. And how many patients?

Mr. HARBAUGH. Thirty-six.

Mr. WALLACE. And three, you think, are not sufficient for thirty-six patients?

Mr. HARBAUGH. No, sir; that only leaves three on duty, you know, the majority of the time; and there is men off for a time, and an emergency will arise any time at a place like that.

Mr. WALLACE. For, say, forty patients, about how many attendants ought there to be?

Mr. HARBAUGH. For forty patients?

Mr. WALLACE. Yes, as a rule.

Mr. HARBAUGH. I should think there should not be less than four, at the lowest calculation. That leaves two together. One man can not handle a man by himself without danger to himself or the patient. My experience teaches me that.

TESTIMONY OF WILLIAM HOWE.

WILLIAM HOWE, being duly sworn, was examined, and testified as follows:

The ACTING CHAIRMAN. What is your name?

Mr. HOWE. W. Howe.

The ACTING CHAIRMAN. How old are you?

Mr. HOWE. Twenty-five years old last November.

The ACTING CHAIRMAN. Where do you live?

Mr. HOWE. 128 Jackson street, Anacostia.

The ACTING CHAIRMAN. Are you employed out at the hospital?

Mr. HOWE. Yes, sir.

The ACTING CHAIRMAN. How long have you been employed there?

Mr. HOWE. I have been employed there five years the 4th of this November coming.

The ACTING CHAIRMAN. Continuously?

Mr. HOWE. Yes, sir.

The ACTING CHAIRMAN. What is your present employment?

Mr. HOWE. Elevator man.

The ACTING CHAIRMAN. In what building?

Mr. HOWE. The general kitchen.

The ACTING CHAIRMAN. How long have you been employed there?

Mr. HOWE. At the elevator?

The ACTING CHAIRMAN. Yes, sir.

Mr. HOWE. About eighteen months—to my best knowledge, eighteen months.

The ACTING CHAIRMAN. What were you employed at before you went there?

Mr. HOWE. As a truckman.

The ACTING CHAIRMAN. Where?

Mr. HOWE. On the east side; on the female side.

The ACTING CHAIRMAN. How long were you employed as a truckman?

Mr. HOWE. About twelve months.

The ACTING CHAIRMAN. What were your duties as truckman?

Mr. HOWE. Well, carrying meals from the kitchen around to the ward on a car.

The ACTING CHAIRMAN. You did that for about twelve months, and since then you have been at the elevator?

Mr. HOWE. No, sir; I washed dishes when I first went there.

The ACTING CHAIRMAN. But these two last periods, I mean.

Mr. HOWE. Since then I have been at the elevator.

The ACTING CHAIRMAN. That would cover about the time that Doctor White has been there?

Mr. HOWE. Yes, sir.

The ACTING CHAIRMAN. What do you know, if anything, about cruelty toward patients out there?

Mr. HOWE. I don't know anything about the patients at all.

The ACTING CHAIRMAN. Nothing?

Mr. HOWE. No, sir. I never seen any of them abused.

The ACTING CHAIRMAN. What do you know about the food?

Mr. HOWE. Well, I don't handle any food, only to dish the meat at noon—at dinner time.

The ACTING CHAIRMAN. Well, you know something about the meat, do you not? What kind of meat do you dish there?

Mr. HOWE. We have corned beef once a week, and every other week we have it twice.

The ACTING CHAIRMAN. How is it in character?

Mr. HOWE. Well, it is fairly good. It is as good as any corned beef I have ever seen. If they have it bad, they send it back.

The ACTING CHAIRMAN. Do you have any boiled meat or roast meat?

Mr. HOWE. Yes, sir; we have boiled corned beef and we have roast beef on Sunday.

The ACTING CHAIRMAN. What kind of roast beef do you have?

Mr. HOWE. It is a rib roast.

The ACTING CHAIRMAN. A what?

Mr. HOWE. A rib roast.

The ACTING CHAIRMAN. But what kind?

Mr. HOWE. Roast beef—beef.

The ACTING CHAIRMAN. I know it is beef; but as to the character, is it good, bad, or indifferent?

Mr. HOWE. Oh, it is fairly good.

The ACTING CHAIRMAN. How is it cooked generally?

Mr. HOWE. I think, to my knowledge, it is cooked fairly good, sir.

The ACTING CHAIRMAN. Take the other provender there and tell us what you know about it, as to its character.

Mr. HOWE. Oh, I don't know about it.

The ACTING CHAIRMAN. What kind of potatoes do you have?

Mr. HOWE. Sometimes we have them with the jackets on, and

sometimes they are peeled. Sometimes we have mashed potatoes and sometimes steamed potatoes. We have what they call creamed potatoes and sometimes have them steamed.

The ACTING CHAIRMAN. Do you see the potatoes with the jackets on? Do you distribute them, or did you when you were operating the truck?

Mr. Howe. Yes, sir; I distributed them; yes, sir.

The ACTING CHAIRMAN. What about your distributing potatoes there that were dirty and had excrement on them?

Mr. Howe. When I distributed any I always washed them myself, and they was always clean—they that I distributed.

The ACTING CHAIRMAN. Did you see any such thing?

Mr. Howe. Yes, sir; I seen these myself. Whenever I distributed any they was always clean, because I washed them myself.

The ACTING CHAIRMAN. Did you see some distributed there that were not clean?

Mr. Howe. I couldn't say they was clean, and I couldn't say they wasn't.

The ACTING CHAIRMAN. Why can you not say?

Mr. Howe. Because I didn't examine the potatoes myself.

The ACTING CHAIRMAN. It would not require much of an examination to tell that, would it?

Mr. Howe. I can tell you how they was washed. They was put in a sink of water and washed and then dipped up with a skimmer dipper.

The ACTING CHAIRMAN. It might not take the dirt off?

Mr. Howe. It might not.

The ACTING CHAIRMAN. What I want to know is, did you see potatoes go out there that were ready for the table with dirt and excrement on them?

Mr. Howe. No, sir.

The ACTING CHAIRMAN. This washing that you speak of—does that precede the boiling?

Mr. Howe. Does it what the boiling?

The ACTING CHAIRMAN. You washed them before you boiled them?

Mr. Howe. Yes.

The ACTING CHAIRMAN. At least they do in Ohio. [Laughter.]

Mr. Howe. They wash them and then steam them.

The ACTING CHAIRMAN. That is what I want to get at.

Mr. Hay. You mean that you washed the potatoes before they were cooked?

Mr. Howe. Oh, yes; when I was a truckman I always washed them myself.

The ACTING CHAIRMAN. You tried to get them right, did you?

Mr. Howe. Yes, sir; they was always all right.

TESTIMONY OF PATRICK DOODY.

PATRICK DOODY, being duly sworn, was examined and testified as follows:

The ACTING CHAIRMAN. What is your name?

Mr. DOODY. Patrick Doody.

The ACTING CHAIRMAN. How old are you, Mr. Doody?

Mr. DOODY. Fifty years.

The ACTING CHAIRMAN. Are you employed at the hospital?

Mr. DOODY. Yes, sir.

The ACTING CHAIRMAN. How long have you been there?

Mr. DOODY. I was first employed there in July, 1882.

The ACTING CHAIRMAN. Have you been there ever since?

Mr. DOODY. No; I left there in 1887. That is, I was sent away to take care of a sick man, by the superintendent, Doctor Godding, and from 1887 until July, 1889, I believe, I was away from there. I have been there ever since July, 1889.

The ACTING CHAIRMAN. Continuously?

Mr. DOODY. Continuously.

The ACTING CHAIRMAN. What are your duties now?

Mr. DOODY. I am a supervisor in Howard Hall department.

The ACTING CHAIRMAN. How many patients have you in your charge?

Mr. DOODY. 35 at the present time.

The ACTING CHAIRMAN. How many attendants have you?

Mr. DOODY. Forty, I believe, if my memory serves me right.

Mr. HAY. Forty, or twenty?

Mr. DOODY. Forty. I wouldn't be positive now, without counting up.

The ACTING CHAIRMAN. How long have you been in that ward?

Mr. DOODY. Well, as supervisor since 1898.

The ACTING CHAIRMAN. Now, Mr. Doody, you have been there, and I wish you would describe how the patients are treated under Doctor White, and what sort of attention and care the attendants give them.

Mr. DOODY. Well, they give them the best attention possible. That is a criminal department, and we have some very vicious men there.

The ACTING CHAIRMAN. You are the gentleman we saw when we were out there?

Mr. DOODY. Yes, sir.

Mr. HAY. You took us through that criminal ward?

Mr. DOODY. Yes.

The ACTING CHAIRMAN. Now, so that we can get it on the record, I wish you would state the character of the patients in the ward of which you are the supervisor.

Mr. DOODY. Well, they are a very violent class of patients, the majority of them—the great majority.

The ACTING CHAIRMAN. How will they manifest their violence?

Mr. DOODY. Well, by fighting each other, or sometimes by fighting the attendants; and I have known of cases where a patient has plotted there with other patients to do up the attendants.

The ACTING CHAIRMAN. How do you restrain them?

Mr. DOODY. Well, in very violent cases we use straps, in a very few cases—just muffs, you might say—to restrain them for the time being, while they are in that violent condition.

The ACTING CHAIRMAN. Such as we saw the day we were out there?

Mr. DOODY. Yes; just as you saw.

The ACTING CHAIRMAN. Are any others in use that we did not see?

Mr. DOODY. There is no restraint there that you did not see that day. There were two restrained when you went there, and you saw the two patients.

Mr. HAY. One was the colored man?

Mr. DOODY. Yes. The other man was in bed. The colored man was in the courtyard.

The ACTING CHAIRMAN. He came up the stairs there?

Mr. DOODY. Yes, sir.

The ACTING CHAIRMAN. Now, in that ward—since you have been there as supervisor, have you ever seen patients knocked down?

Mr. DOODY. Well, no; not in Doctor White's time. I had occasion to report one man. I saw him abuse a patient; but that was in Doctor Richardson's time, and the man was promptly discharged.

The ACTING CHAIRMAN. Would you tolerate any such thing?

Mr. DOODY. No, sir; undoubtedly no. When I was first appointed supervisor there I called the attendants together and told them that any abuse of patients, or harsh language would not be tolerated.

The ACTING CHAIRMAN. And have you tried to maintain that order?

Mr. DOODY. I have; I have.

The ACTING CHAIRMAN. What would you do if you found an attendant violating it?

Mr. DOODY. I should report it to the physician in charge.

The ACTING CHAIRMAN. You would have no hesitancy in doing it, would you?

Mr. DOODY. Not the least. That would be my duty.

The ACTING CHAIRMAN. Are you, yourself, a believer in humane treatment of these people, as far as it can be done?

Mr. DOODY. Undoubtedly. I have suffered at the hands of a patient myself.

The ACTING CHAIRMAN. How?

Mr. DOODY. I was struck over the head. You can see the scar there [indicating]. He struck me with a mop stick, and I was knocked out for a few seconds and didn't know just what had happened; but as soon as I came to myself I told the attendants, "You must not abuse this man. This man is not responsible for what he has done to me." Furthermore, I was confined to bed, I believe, for four weeks. Erysipelas set in, and I believe there was very little hopes for me for a part of the time. One of my first acts upon getting out of bed and getting around, was to go up to this patient and say to him: "Gray"—the patient's name was Gray—"Gray, do you remember this occurrence?" He said, "I do, and I am sorry for it." "Well," I said, "Gray, you must not think about that. I don't hold you responsible for that. You were irresponsible at the time, and I don't hold you at all responsible. You must not think hard about it." That patient got well, and was discharged.

Mr. HAY. You are in charge of insane people, sent there for crime. That is, people who have been convicted of crime, and who are insane, and who are now at the hospital?

Mr. DOODY. Yes.

Mr. HAY. Are the criminal insane kept apart from the others, or not?

Mr. DOODY. Well, we have some vicious patients sent there from the other departments, patients that have struck other patients, and have inflicted serious injuries in some cases on other patients. They are sent to Howard Hall, because we have single rooms there, and they would be better taken care of there. We have single rooms, where

they are not thrown together so much, and we can handle them better than at any other place—that class of patients.

Mr. HAY. So that there is some intermingling of insane criminals with the other insane?

Mr. DOODY. Yes, sir; there are some there in that way; not convicted of crime, but who are vicious, as I stated.

Mr. HAY. What are your hours of work, Mr. Doody?

Mr. DOODY. One day from 6 until 9, and the next day I am excused about 5 o'clock, say.

Mr. HAY. What is your observation, Mr. Doody, as to the character of the men who are employed there; are they too young? Just give us your idea about it.

Mr. DOODY. I would say, in the first place, that every man is not fit to be an attendant over insane people, and I think an older class of attendants would do better.

Mr. HAY. Would do better?

Mr. DOODY. Yes, sir.

Mr. HAY. Do the attendants stay there long, or do they come and go?

Mr. DOODY. Well, we have had some in the department for several years, at Howard Hall.

Mr. HAY. What is the average length of time that an attendant in the department over which you are supervisor stays there?

Mr. DOODY. Well, I don't think I could say accurately. I could not say it accurately.

Mr. HAY. Well, give us an approximation.

Mr. DOODY. I think there are some men there that have been there perhaps seven or eight years; perhaps more than that.

Mr. HAY. And some four or five years, and some three?

Mr. DOODY. Yes; something like that. Speaking for the attendants of Howard Hall, I must speak well for them. They are a good class of men.

Mr. HAY. You have no complaint in regard to that?

Mr. DOODY. No; no I have not. As a rule we have been fortunate, and have a very good class of attendants there. They do not leave as they do in other departments.

Mr. HAY. Do you find that you have help enough?

Mr. DOODY. Well, I would say so, now. I have the same number that I had in Doctor Godding's time, and Doctor Richardson's time; perhaps one or two attendants more. I would not be positive about that, but I think so.

Mr. HAY. Do you need more help on that particular ward, or that particular place, than you would in other places?

Mr. DOODY. Yes.

Mr. HAY. On account of the character of the patients?

Mr. DOODY. Yes; but those wards communicate. Every two wards communicate, so that if there was trouble in one ward the attendants in the other ward could go to their assistance.

Mr. HAY. You have been there a long time. If there is anything you can think of that would be to the interest of the institution, we would be glad to hear what you have to say.

Mr. DOODY. Well, yes. I think if the Superintendent was at liberty to choose his own men he would get a better class of men.

Mr. HAY. You think, then, the civil service does not operate toward obtaining the best class of help?

Mr. DOODY. That has been my experience. We had a better class of men there when we did not have civil service.

Mr. HAY. Do you think of anything else?

Mr. DOODY. Why, no; nothing that I can think of just now.

Mr. BARCHFELD. You spoke of a conspiracy on the part of the patients to do violence to the attendants.

Mr. DOODY. Yes.

Mr. BARCHFELD. Can you mention any single instance?

Mr. DOODY. Yes, sir. There was one instance. There was a colored man accused here in the District of sending out obscene literature through the mails, and at his trial I think he demanded a colored jury.

Now we have got him confined in Howard Hall, and he has tried to get other patients to agree with him in his way of thinking, that the white people are very much opposed to the colored people and would oppress them in every way possible. That is just his way of thinking, owing to his mental condition, I suppose. He has gone to two or three patients there and asked them to help him out. Well, one day there in the dining room he took a pitcher and struck one of the attendants over the head. They took him out of the dining room, and three or four colored men jumped up and said, "Boys, stand by your color," and they had a very serious time there for 15 or 20 minutes, perhaps, and it would have been more serious, perhaps, but for the assistance of some of the patients.

Mr. BARCHFELD. Howard Hall has the most vicious patients at the asylum; is not that true?

Mr. DOODY. Yes, sir.

Mr. BARCHFELD. You get the criminal class from all the Federal penal institutions?

Mr. DOODY. Yes, sir; that go insane.

Mr. HAY. And also from the Army?

Mr. DOODY. Yes, sir; the military prisoners.

Mr. BARCHFELD. Do the doctors universally attend to their duties over there?

Mr. DOODY. Yes, sir.

Mr. BARCHFELD. Day and night?

Mr. DOODY. Day and night.

Mr. BARCHFELD. You never knew of a night doctor to be sleeping while on duty?

Mr. DOODY. No, sir; never to my knowledge.

Mr. BARCHFELD. Did you ever know any of the night doctors to be drunk?

Mr. DOODY. No, sir; I have no knowledge of it.

Mr. BARCHFELD. Or the day doctors, either?

Mr. DOODY. No, sir.

Mr. BARCHFELD. You say you have about 357 patients?

Mr. DOODY. Three hundred and fifty-five.

Mr. BARCHFELD. And some 40 attendants?

Mr. DOODY. Near about; about that. I wouldn't be positive.

Mr. BARCHFELD. That is practically 1 attendant to 9 patients?

Mr. DOODY. Something about 1 to 9 or 10 patients.

Mr. BARCHFELD. That is a pretty fair average, is it not?

Mr. DOODY. Yes, I think so.

Mr. BARCHFELD. I having been connected with asylums and institutions of this kind, know that we never had such a ratio.

Mr. DOODY. No; I remember when Dr. Richardson first came there, the late superintendent, he said he could never get used to having so many attendants as we had there. He thought we had too many.

Mr. BARCHFELD. I suppose you need that number at your particular quarters, owing to the vicious class of patients you have.

Mr. DOODY. Yes; undoubtedly we need that number, especially as the attendants get half a day a week off, and in that way we need all the help we have. They get half a day, and every third Sunday.

Mr. HAY. Do I understand that all the attendants are on duty every day?

Mr. DOODY. No; they get half a day off each week.

Mr. HAY. Are these attendants that you speak of on duty, all of them at the same time?

Mr. DOODY. Sir?

Mr. HAY. Are they all on duty at the same time, or are they off during the daytime and back at night?

Mr. DOODY. Oh, no; we have five night men.

Mr. HAY. Besides the forty?

Mr. DOODY. Let's see; excuse me a minute. We have five night men, but I believe I included them in that ratio of one to nine or ten patients.

Mr. BARCHFELD. Does Doctor White visit Howard Hall frequently or infrequently?

Mr. DOODY. Yes, sir; he has visited frequently.

Mr. BARCHFELD. How often; once a month?

Mr. DOODY. That I couldn't state. I am excused myself every other Sunday, so I am not able to state.

Mr. BARCHFELD. He satisfied you on all matters of requisition? Anything you ask for you generally get?

Mr. DOODY. I generally get it—I always get it.

Mr. BARCHFELD. He has given you assistance in maintaining the decorum of your institution?

Mr. DOODY. Undoubtedly.

Mr. HAY. How often do the board of visitors come through your ward?

Mr. DOODY. I wouldn't be positive about that either. I must say my memory is not the best in that regard. I couldn't say accurately. I wouldn't state that on oath. I couldn't do it.

Mr. HAY. Do they come often?

Mr. DOODY. Yes, sir; they come there very frequently, but as I say, I couldn't state.

Mr. HAY. You could not say how many times a year?

Mr. DOODY. No; I could not. I couldn't state that.

The committee (at 12.30 o'clock p. m.) went into executive session, and at 1.05 o'clock p. m. adjourned until Tuesday, May 15, 1906, at 10 o'clock a. m.

HOUSE OF REPRESENTATIVES,
Washington, D. C., May 15, 1906—10 a. m.

The committee met pursuant to adjournment.

Present: Messrs. Olcott (chairman), Smyser, Barchfeld, Hay, and Wallace; also Dr. William A. White, Stuart McNamara, E. A. Fenning, Richard P. Evans, and others.

TESTIMONY OF CHARLES HAYES.

CHARLES HAYES, being duly sworn, was examined and testified as follows:

The CHAIRMAN. What is your name?

Mr. HAYES. Charles Hayes.

The CHAIRMAN. Where do you reside?

Mr. HAYES. I reside at the greenhouse.

The CHAIRMAN. Here in the District of Columbia?

Mr. HAYES. Yes, sir; at St. Elizabeth's.

The CHAIRMAN. Are you an attendant there?

Mr. HAYES. No, sir.

The CHAIRMAN. Have you been?

Mr. HAYES. No, sir; I never was.

The CHAIRMAN. Have you been in the habit of visiting St. Elizabeth's?

Mr. HAYES. Sir?

The CHAIRMAN. Have you been in the habit of visiting St. Elizabeth's?

Mr. HAYES. Why, I work there. I am employed there. I have been there for eight years, but I am not an attendant. I first worked in the dairy, and then I went into the greenhouse.

The CHAIRMAN. I did not understand you. You say you have been there eight years?

Mr. HAYES. Yes.

The CHAIRMAN. Are you still employed there?

Mr. HAYES. I am still employed there.

The CHAIRMAN. You are now employed in the greenhouse?

Mr. HAYES. Yes, sir.

The CHAIRMAN. Have you come in contact with many of the patients there?

Mr. HAYES. Well, no more than around the grounds, looking through certain wards, at the lower windows. No more than that. Then in the greenhouse, of course, we have patients working there.

The CHAIRMAN. There are patients who work under you?

Mr. HAYES. They are not under me, but they are under Lew Wag-gell. He was an attendant once, and then he was changed to the greenhouse, and he has patients working under him.

The CHAIRMAN. Is he the superintendent of the greenhouse, this Wag-gell that you speak of?

Mr. HAYES. No, sir.

The CHAIRMAN. But he is merely an attendant who comes there—

Mr. HAYES. No; he got an appointment as attendant on the ward, and now he is just working as a florist.

Mr. SMYSER. He was transferred from the ward to the greenhouse?

Mr. HAYES. Yes, sir; and he worked the patients there from the wards over on Doctor Hummer's side.

The CHAIRMAN. Have you anything to say in regard to the treatment of patients over there?

Mr. HAYES. Well, I have seen bad treatment over there among the patients right at the greenhouse.

The CHAIRMAN. In the greenhouse?

Mr. HAYES. Yes, sir; two years ago.

The CHAIRMAN. Who was the person who treated them badly?

Mr. HAYES. This man Lew Waggell.

The CHAIRMAN. What did he do?

Mr. HAYES. They have a patient at that greenhouse, employed on the grounds there, and he was working two years ago out on the grounds——

The CHAIRMAN. What was the name of the patient?

Mr. HAYES. Ben Tippet.

The CHAIRMAN. What happened to him?

Mr. HAYES. The patient naturally got a little stubborn, and I suppose he couldn't drive him as he wanted to drive him, so he sends him down to the little potting shed that is attached to the greenhouse, to give him his medicine. That is what they call their medicine, you know.

The CHAIRMAN. What does that mean?

Mr. HAYES. That means to throw down and choke. That is the medicine they give them.

The CHAIRMAN. Did you see this done?

Mr. HAYES. Yes, sir; I stood right there and looked at it.

The CHAIRMAN. What did he do? Explain what happened there.

Mr. HAYES. The patient came in there. He sent him down to the greenhouse to give him his medicine, and he grabbed hold of him to throw him. The patient was a strong-built man, a right strong, stocky-built fellow, and he threw him. Two other fellows stood there, and they pulled the patient off of him, and got Lew on top, and when Lew got on top he grabbed him right in the throat, like this [indicating].

The CHAIRMAN. These two other fellows—were they attendants or patients?

Mr. HAYES. No; they were employed there.

The CHAIRMAN. Were they patients?

Mr. HAYES. No.

The CHAIRMAN. They were just employed in the greenhouse?

Mr. HAYES. Yes, sir.

The CHAIRMAN. You mean that these two employees took the part of the attendant?

Mr. HAYES. Yes, sir; I stood right there and looked at it.

The CHAIRMAN. What did you do?

Mr. HAYES. I didn't do anything. I never put my hands to it.

The CHAIRMAN. Why did you not protect the patient?

Mr. HAYES. Because the other fellows, you know, had pulled him off, you know; and as soon as they pulled him off of course I didn't want to have anything to do with it, which I would have reported it, but I reported a case there about five years ago when I worked in

the dairy. We worked patients in the dairy, and I reported a case to Doctor Simpson when he had charge there. Doctor Simpson fired the man that I reported, but ever since I reported him the public there got down on me, and for three or four months nobody spoke to me.

The CHAIRMAN. What do you mean by the public?

Mr. HAYES. The employees—the outside employees. They looked down on me, and if I had reported this case——

Mr. SMYSER. Do you say that Doctor Simpson fired the fellow that you reported?

Mr. HAYES. Yes.

Mr. SIMPSON. Was what you reported true?

Mr. HAYES. Yes, sir; it was true. I was working under Mr. Green.

The CHAIRMAN. You are talking now about when you worked under Mr. Green five years ago?

Mr. HAYES. Yes, sir; I judge it was about five years ago. I disremember now how long it has been.

The CHAIRMAN. But upon that report that you made the man who had maltreated the patient was promptly discharged, was he?

Mr. HAYES. Yes, sir; he was, right away.

The CHAIRMAN. But this later occurrence that you speak of—when did this last one happen, by the way?

Mr. HAYES. About two years ago.

The CHAIRMAN. You never made any report of that?

Mr. HAYES. No, sir.

The CHAIRMAN. And you yourself did not attempt to stop the maltreatment of the patient or to make a report?

Mr. HAYES. It was no use to make a report.

The CHAIRMAN. Why? The former man was discharged.

Mr. HAYES. I know, but they would not listen to it.

The CHAIRMAN. Who would not?

Mr. HAYES. If the boss goes there and tells anything on a man it is all right with the superintendent, but the superintendent never listens to a man under the boss.

The CHAIRMAN. But the man five years ago listened to you, did he not?

Mr. HAYES. Yes; because Doctor Godding was the superintendent that I saw about five years ago. It must have been before that. It was in Doctor Godding's time.

The CHAIRMAN. Is there any difference in the treatment of the patients now and what it was in Doctor Godding's time?

Mr. HAYES. When a patient was treated bad in Doctor Godding's time, and it was found out, the attendant was fired right away.

The CHAIRMAN. Do you not think the same thing would happen now?

Mr. HAYES. I don't know whether it would or not.

The CHAIRMAN. Did you ever make any report since Doctor White has been superintendent?

Mr. HAYES. No, sir; because if I made a report——

The CHAIRMAN. Wait a moment. Have you ever made any report since this time, five years ago?

Mr. HAYES. No, sir.

The CHAIRMAN. Why not?

Mr. HAYES. Because it wasn't no use.

The CHAIRMAN. Why do you say it is not any use, because the one you made five years years ago resulted in the discharge of the man?

Mr. HAYES. Yes—well, because the boss is there, and the superintendent would listen to the bosses and he wouldn't listen to you.

The CHAIRMAN. Who was your immediate boss?

Mr. HAYES. Mr. White, the foreman.

The CHAIRMAN. Did he know about this occurrence?

Mr. HAYES. Well, I don't know; no, sir.

The CHAIRMAN. Did he see it?

Mr. HAYES. No, sir.

The CHAIRMAN. Did you ever tell your immediate boss?

Mr. HAYES. No, sir.

The CHAIRMAN. Why not?

Mr. HAYES. Because it was not worth while to tell him anything.

The CHAIRMAN. Why was it not worth while?

Mr. HAYES. Because he never listened to nobody.

Mr. SMYSER. Did you ever try to see any doctor yourself?

Mr. HAYES. I did, on my case. I didn't think I was treated just, and on that particular occasion I got a cool reception.

Mr. SMYSER. That is about you?

Mr. HAYES. Yes, sir.

The CHAIRMAN. But not about the patients?

Mr. HAYES. No, sir.

Mr. SMYSER. Why did you not, seeing this maltreatment of patients by Mr. Waggell, make some report of that so that it would come to the knowledge of the authorities?

Mr. HAYES. Yes; I should have done it—

Mr. SMYSER. Why did you not do what you should have done?

Mr. HAYES. I ought to have done it—

Mr. SMYSER. Why did you not do it then?

Mr. HAYES. I just didn't do it, that was all, because the bosses never listened to you if you would tell them what you think about Lew Waggell.

Mr. SMYSER. How do you know that, if you never made any report?

Mr. HAYES. Well—

The CHAIRMAN. How badly was this patient hurt at that time?

Mr. HAYES. Oh, he was only choked.

The CHAIRMAN. Did he go right to work again?

Mr. HAYES. He was choked, and he hollered "Murder," and Lew says, "Well, he has got his medicine now, and he will be all right for some time."

The CHAIRMAN. What did he do that made the boss angry with him?

Mr. HAYES. I wasn't out in the field at the time. I was down in the potting shed when he sent him down there—a little shed that is attached to the greenhouse.

The CHAIRMAN. Do you know of any other occasions when you saw improper treatment of patients?

Mr. HAYES. Well, I have seen patients there on the wards that was not treated right. I have seen that passing along, through the windows, you know. They are handled and snatched about, you know. In fact, I have seen it at the greenhouse frequently. There is Paddy

Walsh. I was standing there a few weeks ago, and I saw Lew Waggell grab him at the back of the — and snatched him away from the water cooler—rough treatment, such as abusing him about.

The CHAIRMAN. Was this the same man?

Mr. HAYES. Yes.

The CHAIRMAN. What is his name?

Mr. HAYES. Waggell.

The CHAIRMAN. Is there anything else you know of in regard to particular occasions of maltreatment that you can tell us about?

Mr. HAYES. Well, no; I don't know anything of the maltreatment of the patients any more than that.

The CHAIRMAN. Those are the only things you have seen?

Mr. HAYES. Sir?

The CHAIRMAN. Those are the only things you have seen yourself?

Mr. HAYES. Yes, sir; I know there is lots of unjust things done there.

The CHAIRMAN. How?

Mr. HAYES. What I mean is, in the florist business.

The CHAIRMAN. In what way?

Mr. HAYES. In the florist business.

The CHAIRMAN. In what way?

Mr. HAYES. Why, in the flowers. The patients don't get flowers there that certain employees get there. The doctors can get a bunch of flowers there whenever they want them. The doctors' wives can take them out of the gates, but if anybody else wants flowers, or if the patients want a flower, they can not get them. The best flowers is picked and sent to the physicians' dining rooms; and also when they want a bouquet of flowers, if their wives want anything to take out of the gate, they can carry them out of the gate. I know that, and it is a one-sided affair up there, anyway.

Mr. SMYSER. How?

Mr. HAYES. The bosses—it is a kind of a clique among the bosses, and whatever the bosses do is all right, and whatever an employee does is all wrong. There isn't no justice done to a man up there in this way. If he is a drunkard, he can go in there and drink and carry on, and if he is a boss he can stay there. There is that fellow Maenche. I have seen him dozens of times when he was under the influence of liquor. Upon my word, if I had a sister working in the laundry and he abused and treated her like he does them it would tempt me to fight him.

The CHAIRMAN. What do you know about Maenche?

Mr. HAYES. I know that he is a noted drunkard. I know that. He is a noted drunkard.

The CHAIRMAN. When was he discharged from the asylum?

Mr. HAYES. He was never discharged.

The CHAIRMAN. He is there now, is he?

Mr. HAYES. Yes, sir; he is staying there. He is a boss. If it was me, and if I was to go out there—which I have never done, drunk—but if I was to go out there drunk I would hardly have a pin head of a show; just so the boss reported me to the superintendent, I would have to go. But the boss can stay there. That is why I say there is no justice.

Mr. SMYSER. What about the treatment there in the laundry, by

Maenche, that leads you to say that if you had a sister there and he treated her in that manner you would flog him? What did you see which leads you to say that?

Mr. HAYES. I have knew him to talk of those girls——

Mr. SMYSER. What did you hear him say?

Mr. HAYES. I have heard him talk harshly to them, and abuse them around.

Mr. SMYSER. What did he say?

Mr. HAYES. He just told them——

Mr. SMYSER. What did he say?

Mr. HAYES. What did he say?

Mr. SMYSER. That is what I am asking you.

Mr. HAYES. He spoke to them in a cross way.

Mr. SMYSER. Well, what did he say? We will judge of how it was, if you will tell us what he said. That is what I want to get at.

Mr. HAYES. Well, I know; but it is just this way. The girls would go to him and ask him a question——

Mr. SMYSER. Did you see them go to him?

Mr. HAYES. I have seen them go to him.

Mr. SMYSER. What would they say to him?

Mr. HAYES. They would ask him about different——

Mr. SMYSER. What would they ask him?

Mr. HAYES. They would ask him about different part of the work.

Mr. SMYSER. What did he say?

Mr. HAYES. Of course, I am not employed in the laundry, but I would see it when I was back there.

Mr. SMYSER. What did you hear him say that aroused your anger to the point where, if you had a sister there, you would flog him?

Mr. HAYES. I have heard him say to go on and do her work, and stop running to him. I have heard that.

Mr. SMYSER. Is that all you have heard?

Mr. HAYES. Yes. Well, I have heard——

The CHAIRMAN. Did he use any bad language to them?

Mr. HAYES. I don't know that he has used bad language in the laundry there, but he uses mighty bad language when he comes into the grounds at night, cussing and swearing. He is nothing but a drunkard, and a noted one. The superintendent knows it. The chances are that charges has been put before him.

The CHAIRMAN. You do not know anything about that, though, one way or the other?

Mr. HAYES. I know he is a drunkard.

The CHAIRMAN. But you do not know whether any charges have been made against him to the superintendent, do you?

Mr. HAYES. No, no more than I have heard. And I might say that the grub affair up there is very poor—very poor.

The CHAIRMAN. The what?

Mr. HAYES. The grub.

The CHAIRMAN. You mean the food that you have?

Mr. HAYES. Yes, sir; that we have.

The CHAIRMAN. What is the matter with it?

Mr. HAYES. I have set down at the table last summer when the meat actually had a bad smell, and I would have to get up and leave the dinner or whatever meal was there. Now.

The CHAIRMAN. Would that often happen?

Mr. HAYES. Often. If I would set down to a good meal there once this year, it is more than I know anything about.

The CHAIRMAN. You have been there eight years, have you not?

Mr. HAYES. Yes, sir; I have.

The CHAIRMAN. Has this food been bad during all that time?

Mr. HAYES. In Doctor Godding's time we had pretty good food, and also in Doctor Richardson's time—pretty good food.

The CHAIRMAN. What do you stay there for if the food is bad?

Mr. HAYES. Because it is bad.

The CHAIRMAN. I say, why do you stay if the food is bad?

Mr. SMYSER. Do you like the bad food? Is that what induces you to stay?

Mr. HAYES. No, sir; I don't like it.

The CHAIRMAN. What pay do you get?

Mr. HAYES. I only get \$22.50.

Mr. BARCHFELD. That is less than an Italian laborer receives working on the railroad.

Mr. HAYES. Yes, sir.

Mr. BARCHFELD. Still, you are content to remain there for \$22.50 and eat this bad food?

Mr. HAYES. Because I have no home, no more than what I pay for, and I just have to put up with it.

The CHAIRMAN. Do you mean to say you can not get work anywhere else?

Mr. HAYES. Well, I suppose I could, maybe.

The CHAIRMAN. Have you ever tried to?

Mr. HAYES. I have worked in other places.

The CHAIRMAN. Where?

Mr. HAYES. I put in a notice there when I worked in the dairy about four years. I put on a notice on the 15th of March and I left the 1st of April. The doctor advised me to go down in the country. I was suffering from rheumatism. He advised me to go down in the country, and I went there and stayed four or five months. Then I came back and worked in town a while.

The CHAIRMAN. What did you go back to the asylum for?

Mr. HAYES. I don't know. I was treated all right when I was in the dairy, and I went back the second time to work there.

The CHAIRMAN. How long have you been in the greenhouse?

Mr. HAYES. I have been in the greenhouse about three years this December.

The CHAIRMAN. During all that time the food has been bad, and you have only got \$22.50 a month?

Mr. HAYES. Yes.

The CHAIRMAN. And yet you have stayed there?

Mr. HAYES. There is other people getting raises right around me, and I am kept down.

The CHAIRMAN. What do you stay there for? You look as if you were a man who could earn a living almost anywhere.

Mr. HAYES. Well, I suppose I could. I have an idea not to stay any longer. [Laughter.]

Mr. SMYSER. Are you mad because your wages have not been raised?

Mr. HAYES. Sir?

Mr. SMYSER. I say, are you mad because your wages have not been raised?

Mr. HAYES. Well, yes; I think that the wages could be raised there. There is some there getting raises, and I am held down.

Mr. SMYSER. You do not like that; it is not treating you fair?

Mr. HAYES. No, sir; I don't think it is a fair deal. That is what I say.

Mr. SMYSER. A square deal, you ought to say. [Laughter.]

Mr. HAYES. Of course, persons may make mistakes sometimes.

TESTIMONY OF MRS. MALVINA TEMPLE.

Mrs. MALVINA TEMPLE, being duly sworn, was examined and testified as follows:

The CHAIRMAN. What is your name?

Mrs. TEMPLE. Malvina Temple.

The CHAIRMAN. What do you know about the asylum?

Mrs. TEMPLE. Well, I had a husband there for two years and a half.

The CHAIRMAN. When?

Mrs. TEMPLE. He went there July 6, 1901, and he left there two years and six months and six days afterwards.

The CHAIRMAN. So that was in the early part of 1904 that he died?

Mrs. TEMPLE. 1904.

The CHAIRMAN. The early part of 1904?

Mrs. TEMPLE. He died December 10, and he went there on July 6.

The CHAIRMAN. That would be 1903, then. How was your husband treated there when he was in there?

Mrs. TEMPLE. He was not treated very well. I have gone there on many occasions when he would be frightfully bruised.

The CHAIRMAN. During most of the time he was there, it was when Doctor Godding was superintendent, was it not?

Mrs. TEMPLE. No; Doctor Richardson.

The CHAIRMAN. Doctor Richardson, I should say.

Mrs. TEMPLE. He went there in Doctor Richardson's time, but he died in Doctor White's time.

The CHAIRMAN. And Doctor White was the superintendent for only about two months before his death? Doctor White went there, I think, in October, and your husband died in December.

Mrs. TEMPLE. December—the 10th of December.

The CHAIRMAN. Did you ever make any inquiry as to how these bruises you speak of happened?

Mrs. TEMPLE. I did; from the attendants.

The CHAIRMAN. What did they say?

Mrs. TEMPLE. Sometimes they would say that he was struck by a patient and sometimes they told me he had fallen. One time I went there he was very much bruised, and they told me he had slipped on the oiled floor, and that that caused the bruises; but I did not believe that, because I have been there often when I could see the bruises from the knuckles on his face, and I truly believe that it was done by the attendants.

Mr. SMYSER. Ask her if she ever saw an attendant inflict these things.

Mrs. TEMPLE. I did not. I don't suppose they would do it before me.

The CHAIRMAN. Did you ever see any attendants maltreat any other patient?

Mrs. TEMPLE. I did not, because my husband, a great part of the time, was able to be brought out to the reception room for me to see him. Naturally I would not come in contact with other patients.

The CHAIRMAN. What was the matter with your husband?

Mrs. TEMPLE. Softening of the brain.

The CHAIRMAN. Was his mind in such a condition that he could talk to you in regard to matters intelligently?

Mrs. TEMPLE. Quite often; but the latter part of his sickness, during the latter part of the time he was there, he was confined to bed for a while; but quite often when I would go there he would be able to talk to me very rationally, and often he would be able to come out to the reception room.

Mr. SMYSER. For how long a period prior to his death was he confined to bed?

Mrs. TEMPLE. About four months, I should say, in all.

Mr. SMYSER. During that period of four months did you see any of these bruises?

Mrs. TEMPLE. No; not while he was in bed.

Mr. SMYSER. That was while he was up and around?

Mrs. TEMPLE. That was while he was up and around; yes.

The CHAIRMAN. Did you have any opportunity of knowing anything about the food that was given to your husband?

Mrs. TEMPLE. I have been there sometimes when he would have his meal served when I happened to be there.

The CHAIRMAN. That was when he would be in bed?

Mrs. TEMPLE. No, sir; he sometimes has been able to be out on the porch, and they have brought the food there sometimes when I would be on the porch. It was not very good. I have taken things there that I feel satisfied he never got. I took him a pair of easy slippers and hose, and when I would go there he would have on these Government shoes, and he would not have what I had taken him at all.

The CHAIRMAN. Did you ever make any inquiries about that?

Mrs. TEMPLE. I have; and they said he wore them sometimes, and they just bluffed me off. On one occasion I took him a new suit of clothes, and I never saw it but once afterwards while he was there.

The CHAIRMAN. These occurrences took place when he was up and around—your taking him these slippers and clothes?

Mrs. TEMPLE. When he was up and around; sure.

The CHAIRMAN. Had you any cause of complaint or dissatisfaction after he was confined to bed?

Mrs. TEMPLE. Yes; when my husband was confined to bed—he was suffering then with consumption—his bed was directly in front of the door. He got every draft from it. I asked if the bed could not be moved, because every time the door was opened and closed it barely escaped the foot of his bed. He got the draft all the time, and I am positive he would have been alive longer but for the fact that he got those drafts all the time in the cold weather.

The CHAIRMAN. Was he in a ward where people who were afflicted with consumption were placed, all together, or was there anybody else there?

Mrs. TEMPLE. No; I don't think so. I think they had all cases on that ward, on Doctor Simpson's side. I think they had all cases there. The entire time he was sick his bed was in front of the draft of this door.

The CHAIRMAN. You spoke to an attendant about that?

Mrs. TEMPLE. I did.

The CHAIRMAN. Did you ever speak to any of the doctors about it?

Mrs. TEMPLE. Yes; I spoke to Doctor Simpson, too. I asked if his bed could not be moved.

The CHAIRMAN. What did Doctor Simpson say?

Mrs. TEMPLE. He said he would see about it, and that is all the satisfaction I got.

Mr. SMYSER. I would like to ask just one question. He was confined to bed; but outside of the fact that his bed was so placed that a draft struck him, as you thought, was there any other neglect or mistreatment of your husband that you saw?

Mrs. TEMPLE. Well, I have been there at times when he used to have ice caps on his head, and I have often been there when there would be no ice in the cap at all, and several such little things as that.

Mr. SMYSER. What are some of the other little things like that?

Mrs. TEMPLE. Well, sometimes his night clothes was not kept just as nice as they should be.

Mr. SMYSER. Were they soiled?

Mrs. TEMPLE. Soiled; yes. I have been there often, and I have been there often when I did not think he had proper bedclothes that he should have—covering, I mean.

The CHAIRMAN. You mean insufficient clothing?

Mrs. TEMPLE. Insufficient clothing. I have been there and stayed with him as much as three hours, and as ill as he was I have been there when an attendant would not come to give him any nourishment or to see to him in that length of time; and I should think a man as ill as that would need attention. The doctor gave me the privilege of staying with him quite a while on Sundays.

Mr. SMYSER. During that three hours that you stayed there did you call the attention of the attendant to the fact that he needed attention and that he did not get it?

Mrs. TEMPLE. Yes; when I saw one.

Mr. SMYSER. Who was the attendant?

Mrs. TEMPLE. I do not know the nurses' names. They have lady nurses in the hospital.

Mr. SMYSER. Can you not give us the name?

Mrs. TEMPLE. I do not know their names. I know Doctor Simpson was a doctor; but I do not know the nurses' names.

Mr. SMYSER. Was Doctor Simpson a man or a woman?

Doctor WHITE. A man.

TESTIMONY OF TURNER A. DELANEY.

TURNER A. DELANEY, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. What is your full name?

Mr. DELANEY. Turner A. Delaney.

The CHAIRMAN. Where do you live?

Mr. DELANEY. 373 Jackson street, Anacostia.

The CHAIRMAN. Were you ever employed in the hospital?

Mr. DELANEY. Yes, sir; from May 8, 1900, until May 15, 1904.

The CHAIRMAN. What was your position there?

Mr. DELANEY. For the first ten months of my employment there I was on a ward as an attendant, and the remainder of my time I was with the carpenter.

The CHAIRMAN. With the carpenter?

Mr. DELANEY. With the carpenter; yes, sir.

The CHAIRMAN. How old are you now?

Mr. DELANEY. Twenty-eight years.

The CHAIRMAN. What were your duties when you were employed as a carpenter—just to do carpentering work around the asylum?

Mr. DELANEY. Yes, sir; through the various wards in the institution—outside sometimes, and sometimes in the wards.

The CHAIRMAN. During that time did you see any of the patients—while you were a carpenter?

Mr. DELANEY. Yes; I was in the wards where they were quite often.

The CHAIRMAN. Did you ever see any ill treatment of any of the patients?

Mr. DELANEY. I never saw them abused on the wards. I have seen them kicked by the attendants on the outside of the building.

The CHAIRMAN. When was it that you saw that?

Mr. DELANEY. Well, I can not say the exact date. It was the latter part of my employment there, you might say.

The CHAIRMAN. Do you know what attendant did any kicking?

Mr. DELANEY. No, I don't know them by name.

The CHAIRMAN. Did you see that happen more than once?

Mr. DELANEY. How is that?

The CHAIRMAN. Did you see a patient kicked more than once?

Mr. DELANEY. On several occasions, while out walking.

The CHAIRMAN. But you can not specify any particular occurrence, can you?

Mr. DELANEY. No, sir; no particular occurrence. When I was on the ward I never saw any abuse of any patients. I never saw no one abused. I never saw any patient abused in any way, shape, or form.

Mr. HAY. Were you discharged, or did you resign voluntarily?

Mr. DELANEY. I resigned.

The CHAIRMAN. When you were made a carpenter, were you paid by the authorities of the asylum?

Mr. DELANEY. Yes, sir; I was paid by the authorities of the asylum, by the month. I first went there and made application for a place as carpenter, and there was no vacancy. Previous to my going there I worked two years—well, a fraction over two years—at the carpenter's trade. There was no vacancy there, and I made application then for a place as an attendant, and I worked there as an attendant until there was a vacancy with the carpenters.

The CHAIRMAN. Did you go in under the Civil Service regulations?

Mr. DELANEY. Yes, sir; I filled out a civil service application. There was no examination about it.

The CHAIRMAN. There was no examination?

Mr. DELANEY. No, sir.

The CHAIRMAN. When you took a position as carpenter, was there any examination given you?

Mr. DELANEY. No. Well, the reason of that, I guess, was that even though I had served two years and some few months at carpentering before I went there, I wanted to serve the full four years under the Government; consequently I made out the application as an apprentice, in order to serve the full four years under the Government.

The CHAIRMAN. What was your object in serving the full four years under the Government?

Mr. DELANEY. Because I thought it would be of advantage to me. I afterwards learned that it was not.

Mr. HAY. How much wages do you receive?

Mr. DELANEY. When I first went to work with the carpenters, when I got the place with them, I went to work for \$20 a month and board. When I left there—I left the 15th of May, 1904—during that part of May and during the month of April I received \$35 per month. I left because I could not get more money, even though I was recommended for it. I was recommended for an increase of \$15 a month in pay. I approached Doctor White, and he told me that after pay day he would attend to it. I again approached him after pay day, and he informed me he had forgotten me entirely; he didn't know who I was. I approached him again after the following pay day, and he didn't know who I was. He seemed to be rather forgetful of it, and as a consequence I left the employ of the Government and went outside to work. The first position I got when I went to work I got \$2.50 per day——

Mr. SMYSER. We do not care about that.

Mr. DELANEY. I thought you were desirous to know if I was capable or not.

Mr. SMYSER. You say you saw patients kicked when out walking?

Mr. DELANEY. Yes, sir.

Mr. SMYSER. And this was the latter part of your service?

Mr. DELANEY. Yes, sir.

Mr. SMYSER. Were they kicked by an attendant?

Mr. DELANEY. Yes, sir; I would judge so by the clothing he wore.

Mr. SMYSER. What occasioned that? Do you know?

Mr. DELANEY. I do not. I did not take particular notice of that, but I could not help taking notice of the other.

Mr. SMYSER. How close were you to them?

Mr. DELANEY. I suppose I was within 75 or 100 yards of them.

Mr. SMYSER. Whereabouts were these patients kicked?

Mr. DELANEY. On the limbs.

Mr. SMYSER. On the legs, do you mean?

Mr. DELANEY. Yes, sir.

Mr. SMYSER. In the front or in the rear?

Mr. DELANEY. In the rear.

Mr. SMYSER. Did you see that more than once?

Mr. DELANEY. Yes, sir; on several occasions. I couldn't exactly say how many; I suppose some two or three times.

Mr. SMYSER. What occasioned that you do not know?

Mr. DELANEY. No, sir.

Mr. SMYSER. What was the effect on the patient, if you could observe?

Mr. DELANEY. Well, the patient got out of the way as best he could on each occasion.

Mr. SMYSER. Was it a single kick or was it renewed?

Mr. DELANEY. Well, I couldn't exactly say on that.

Mr. SMYSER. Why can you not say? You were looking, were you not?

Mr. DELANEY. Well, I didn't take a great deal of interest in it.

Mr. SMYSER. Why?

Mr. DELANEY. I was not deeply interested in it.

Mr. SMYSER. Why? Were you not interested in seeing some fellow with no mind being kicked by some brutal attendant?

Mr. DELANEY. If I was to approach an official——

Mr. SMYSER. I am not asking you about that. You could look and the official know nothing about it, could you not?

Mr. DELANEY. If I was looking too long I was neglecting the work, as a matter of fact.

Mr. SMYSER. Then you did not look too long; is that it?

Mr. DELANEY. Yes, sir. It just happened to come under my observation.

Mr. SMYSER. Was it a single kick or more than one?

Mr. DELANEY. I never saw but one that I can say positively. When he was kicked once the patient got out of the way.

Mr. HAY. You say "if you had approached one of the officials." What would have happened if you had?

Mr. DELANEY. I would have been informed that they was attending to that line of it, or something of that kind.

The CHAIRMAN. How do you know that?

Mr. DELANEY. That is my experience along that line.

Mr. HAY. That was your experience?

Mr. DELANEY. How is that?

Mr. HAY. Did you ever make any complaints to anyone at all? You say that was your experience.

Mr. DELANEY. Well, it was a kind of "keep mum" plan over there. A man must not know too much.

Mr. HAY. What I mean to ask is, Did you make any complaints to anyone?

Mr. DELANEY. Relative to——

Mr. HAY. Relative to the treatment of patients or anyone else.

Mr. DELANEY. No, sir; I did not.

Mr. HAY. How do you know that these officials would have treated any complaint that you might have made by telling you you must attend to your own business?

Mr. DELANEY. Well, I will tell you why I sum it up that way. It is on account of the treatment that I received on one particular occasion when I was sick myself and I did not receive the attention I should have received—that is, I couldn't eat all kinds of food and I asked for sick diet, and I asked three times. When I asked the physician the third time he gave me to understand that I should be careful who I was talking to.

Mr. SMYSER. What did he say?

Mr. DELANEY. I couldn't repeat the exact words, but anyhow——

Mr. SMYSER. I wish you would try to recall them. Maybe you got a wrong understanding. Tell us what he said, and let us judge as to what the understanding should be.

Mr. DELANEY. I may have, but I don't think I have, anyway.

Mr. HAY. Who was this physician?

Mr. DELANEY. Doctor Hummer. That was while Doctor Richardson was superintendent there, and when he spoke to me in that way, then I informed him that he could order it if he so desired, otherwise I would go to Doctor Richardson and would get it. He turned to where an attendant was standing a few feet away from him and sent the attendant to the kitchen with an order for sick diet, and I got it twenty minutes after, I venture to say.

Mr. SMYSER. You needed the sick diet, did you?

Mr. DELANEY. I did. There is one thing I would like to ask, if it is in order. The food there became very unsatisfactory to me while I was there, and I approached Doctor White and asked him to make me an allowance of \$10 a month.

Mr. HAY. You mean for food?

Mr. DELANEY. Yes, sir; the food was very bad. I approached him and asked him to make me a \$10 allowance per month, in order to buy my food myself. That \$10 would be better than nothing, because I was then boarding myself rather than eat the food. He informed me that he could not do that. My reason for asking this, gentlemen, is this: That I understand there is an appropriation of some twenty-odd dollars a month for board and laundry of employees. If there is such a thing as an appropriation of \$26 a month for board and laundry, why should not the Government save that difference? I couldn't understand that. I would have been willing to board myself for \$10 a month, and I offered to do it and was refused.

Mr. HAY. I did not exactly catch that. Do you say there is an appropriation of \$20 a month for board and laundry?

Mr. DELANEY. I have understood that there was. I am not positive of it.

Mr. SMYSER. Where did you get that understanding? Who told you so?

Mr. DELANEY. I am not able to say just now, but I think it came from an attorney. I can not say just who he was.

Mr. SMYSER. Where did he live?

Mr. DELANEY. It was an attorney who was employed by the attendants there to look out for their interests in general.

Mr. SMYSER. Was it Mr. Siddons?

Mr. DELANEY. I couldn't say.

Mr. HAY. But this appropriation was that one of the employees could be paid how much, do you say, a month? Ten dollars?

Mr. DELANEY. I understood there was an appropriation of \$26 a month for the food and laundry and lodging of each employee. I got my lodging at home, and also got my board at home.

Mr. HAY. You say that the board was so bad that rather than eat it you went to the extent of paying for your own board?

Mr. DELANEY. Yes, sir; I paid for my own food at home.

Mr. HAY. When was that.

Mr. DELANEY. That, I suppose, was about six months before I left there. I left there May 15, 1904.

Mr. HAY. What was the character of the food? What was the matter with it?

Mr. DELANEY. Well, the meat I did not take to be clean, because there was an odor to it.

Mr. HAY. Did that happen often, or just occasionally?

MR. DELANEY. And they had no butter. It was a kind of a mixture. It looked some like tallow and something. I don't know what it was exactly. I believe they called it oleomargarine.

MR. HAY. Did that happen often, or just occasionally?

MR. DELANEY. It was constant at that time. I understood that the appropriation was short, and it was the best they could afford.

MR. SMYSER. How did you get these understandings about appropriations, and from whom?

MR. DELANEY. How do I get it?

MR. SMYSER. How did you get it, and from whom?

MR. DELANEY. I venture to say that that is merely hearsay; that part is.

MR. SMYSER. I am asking you—

MR. DELANEY. It is merely hearsay on my part. That part is hearsay. The others are facts, under my own observation.

MR. SMYSER. That is, as to the meat and the oleomargarine?

MR. DELANEY. Yes, sir. Further, more than that, about the time that those appropriations, as I understood, were short, I have seen patients there given a slice of bread and three prunes, with the seeds in them, and the patients didn't know any better than to eat the prunes, seeds and all, and they eat the whole business, and then didn't have enough. [Laughter.] And I have seen the same thing with evaporated peaches. They would have a little bit of peaches and a slice of bread, and sit down and eat that for the evening meal, and that was all there was to eat, and they had to be contented with it.

THE CHAIRMAN. How often did you see those things?

MR. DELANEY. Quite often, in passing through the wards in my own line of work. It seemed to be the general thing after the appropriation was reported to have run short.

THE CHAIRMAN. You saw these things when the patients were being served with meals?

MR. DELANEY. Yes, sir.

THE CHAIRMAN. Do you know that that is all they got—three prunes and a slice of bread for the evening meal?

MR. DELANEY. I have seen it quite often; but of course they had tea or coffee, one of the two. They had tea usually in the evening.

THE CHAIRMAN. When did you see that?

MR. DELANEY. Well, it was, I guess, about the early part of 1904.

TESTIMONY OF C. J. FRITZ.

C. J. FRITZ, being duly sworn, was examined, and testified as follows:

THE CHAIRMAN. What is your name?

MR. FRITZ. C. J. Fritz.

THE CHAIRMAN. What is the last name? Spell it, please.

MR. FRITZ. F-r-i-t-z—just as Dutch as you can get it.

THE CHAIRMAN. Were you ever employed in St. Elizabeth's Hospital?

MR. FRITZ. No, sir.

THE CHAIRMAN. Were you a patient there?

MR. FRITZ. No, sir.

The CHAIRMAN. What do you know about it?

Mr. FRITZ. How do you mean?

The CHAIRMAN. What do you know about the asylum?

Mr. FRITZ. From intercourse with ex-employees of the institution that I have had——

The CHAIRMAN. Were you ever over in the hospital? Did you ever visit the hospital?

Mr. FRITZ. The grounds?

The CHAIRMAN. The whole business. Did you ever go in any of the buildings?

Mr. FRITZ. I couldn't say that; no, sir.

The CHAIRMAN. Did you ever see any attendant take care of any patient there?

Mr. FRITZ. No, sir; I have only heard the testimony.

The CHAIRMAN. Then I do not think you know very much about it, and you are excused.

Mr. SMYSER. Let me ask a question. How did you happen to come here?

(The witness produced a paper and handed it to Mr. Smyser.)

Mr. SMYSER. That is the subpoena. How did anybody know that you knew or did not know anything? Did you give the information yourself?

Mr. FRITZ. That is too hard for me to tell, sir.

Mr. SMYSER. Did you write a letter to anybody about it?

Mr. FRITZ. That remains for the general public to find out.

Mr. SMYSER. I am asking you, sir. Did you not write a letter about it?

Mr. FRITZ. Yes, sir.

Mr. SMYSER. The only information you have is what some employee told you, is that it?

Mr. FRITZ. What is that?

Mr. SMYSER. What you know about the hospital is what somebody told you?

Mr. FRITZ. Yes, sir; yes, sir. I beg your pardon, Mr. Chairman, but——

The CHAIRMAN. Just excuse me a moment. What is your business?

Mr. FRITZ. I am a mill worker.

Mr. HAY (indicating a letter). I think a fair reading of that letter shows that he did not want to testify himself, but was ready to give information of others who would testify. If you read that letter, I think that is the construction you will put upon it.

Do you know any people who know anything about this?

Mr. FRITZ. I did until several days ago, having taken quite an interest in the affairs of St. Elizabeth; but, unfortunately, I have lost my list of names.

Mr. HAY. So you can not give us any information that you know yourself?

Mr. FRITZ. For the present, no.

Mr. HAY. Or the names of any people who know anything about it?

Mr. FRITZ. For the present, no.

TESTIMONY OF EUGENE BALL.

EUGENE BALL, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. What is your name?

Mr. BALL. Eugene Ball.

The CHAIRMAN. Where do you live?

Mr. BALL. I live out in the country, in Prince George's, Maryland.

The CHAIRMAN. Were you ever employed in St. Elizabeth Hospital?

Mr. BALL. Yes, sir.

The CHAIRMAN. When?

Mr. BALL. I was employed April 3, 1891.

The CHAIRMAN. How long did you remain there?

Mr. BALL. Until February, 1902. I was never under Doctor White.

The CHAIRMAN. All right; you are excused, then.

TESTIMONY OF JOSEPH W. BELT.

JOSEPH W. BELT, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. What is your full name?

Mr. BELT. Joseph W. Belt.

The CHAIRMAN. Where do you live?

Mr. BELT. Leesburg, Va.

The CHAIRMAN. Do you know anything about St. Elizabeth's?

Mr. BELT. Yes, sir.

The CHAIRMAN. Were you ever employed there?

Mr. BELT. I was; from October 21, 1903, until January 28, 1906.

The CHAIRMAN. How old are you?

Mr. BELT. Twenty-one.

The CHAIRMAN. What were your duties there?

Mr. BELT. Attendant on the ward.

The CHAIRMAN. What ward?

Mr. BELT. Well, I relieved on several wards.

The CHAIRMAN. You were acting as a sort of substitute? You were not regularly in any ward; is that what you mean?

Mr. BELT. I had a regular ward after I was there about three months.

The CHAIRMAN. What ward was your regular ward?

Mr. BELT. Dawes, third.

The CHAIRMAN. Did you see any improper treatment of patients there in the hospital?

Mr. BELT. Not on Dawes, third. I have on Gray Ash.

The CHAIRMAN. What did you see?

Mr. BELT. Mr. Hawkins, one of the attendants there, carries a wire—

The CHAIRMAN. A wire?

Mr. BELT. A wire, to thrash the patients across the head when they don't mind him as he thinks they ought to.

The CHAIRMAN. Have you ever seen him do it?

Mr. BELT. I have.

The CHAIRMAN. How big a wire?

Mr. BELT. A small-size electric wire, insulated.

The CHAIRMAN. What do you mean—one of these wires that are covered with green silk, that we see on telephone booths?

Mr. BELT. Yes, sir.

The CHAIRMAN. It was like those wires?

Mr. BELT. Yes; about the size of a telephone wire. It was about two feet and a half long. He usually had it doubled when he was using it.

Mr. SMYSER. Did you ever see him use it?

Mr. BELT. I have.

Mr. SMYSER. Where would he use it on the patient?

Mr. BELT. Over the head.

Mr. SMYSER. What patient did you ever see him use it on?

Mr. BELT. Let me see if I can tell the name. I don't think I can.

Mr. SMYSER. How many times have you seen him use it? Have you seen him use it more than once?

Mr. BELT. Yes, sir; I have seen him use it on several patients.

Mr. SMYSER. Do you know the names of any of the patients?

Mr. BELT. I couldn't tell you the last names, but I know the name of one. Rube, they called him; a very tall fellow, on Gray Ash. I expect he is there yet.

Mr. SMYSER. What was the occasion of his using this wire on their heads?

Mr. BELT. When they began to walk up and down the hall, and he thought they should be setting on the settees.

Mr. SMYSER. Had they their hats on?

Mr. BELT. No, sir; no hats.

Mr. SMYSER. He would strike them over the head?

Mr. BELT. He would.

Mr. SMYSER. How frequently?

Mr. BELT. Well, until they hollered. I have seen them get their head nearly to the floor and holler murder and fire and everything else before he quit.

The CHAIRMAN. Did you ever report this to anybody?

Mr. BELT. No, sir.

The CHAIRMAN. Did you ever object to it, or try to stop it in any way?

Mr. BELT. No. I was working under Hawkins, and I didn't think I had a right to.

The CHAIRMAN. Did you ever do anything of that kind to a patient?

Mr. BELT. No, sir.

The CHAIRMAN. Did you ever maltreat a patient yourself?

Mr. BELT. No, sir.

The CHAIRMAN. Did you ever strike a patient?

Mr. BELT. I never did.

The CHAIRMAN. Did you ever have any scrap with any of them?

Mr. BELT. I never did.

Mr. SMYSER. Was there any occasion for this treatment by Hawkins that you have described?

Mr. BELT. I don't know whether you would call it occasion or not. He would tell a patient to set in the settee, and when he got up he would simply beat him with the wire.

Mr. SMYSER. Did you think at the time that was brutal and unnecessary?

Mr. BELT. I didn't know much about it; I was a new employee.

Mr. SMYSER. Well, you were a kid. You know what it is to get a licking, do you not?

Mr. BELT. I see.

Mr. SMYSER. What occurred to you when you saw that out there?

Mr. BELT. Well, I didn't know whether he had to do that to make the patient mind him or not. I didn't know whether it was the rule to do it or not.

Mr. SMYSER. Irrespective of the rule of the employees, did it look to you to be brutal and uncalled for?

Mr. BELT. Well, it looked like it might have been helped.

Mr. SMYSER. There was no occasion for that. Is that the way it seemed to you? You thought it was not necessary to do that?

Mr. BELT. No, sir; it was not necessary to do it, I thought.

Mr. SMYSER. Where were you born and raised?

Mr. BELT. At Leesburg, Va.

Mr. SMYSER. Now, then, being of a good old line of cavaliers down there, why did you not report this?

Mr. BELT. I didn't know what I would get said about me if I reported it.

Mr. SMYSER. Were you afraid? Did you think it was best to keep still and say nothing?

Mr. BELT. I did.

Mr. SMYSER. Is that the reason you did not report it?

Mr. BELT. Yes, sir.

Mr. SMYSER. You did not approve of that kind of treatment, did you?

Mr. BELT. No; I did not.

The CHAIRMAN. Do you know of any other particular cases where a patient was badly treated?

Mr. BELT. No; I couldn't say.

The CHAIRMAN. Who was this man Rube? Was he an old soldier?

Mr. BELT. I don't think he was. I think he was a telegraph operator before he came there.

The CHAIRMAN. Did you ever see any attendant treat badly an old marine?

Mr. BELT. Yes, sir.

The CHAIRMAN. Tell us about that. Who was the attendant, when did it happen, and what was done?

Mr. BELT. The attendant was the same man, Hawkins. He hit a marine several times in the stomach for spitting on the floor, and knocked him breathless.

The CHAIRMAN. He hit him with his fist, you mean?

Mr. BELT. He hit him with his fist.

The CHAIRMAN. When did this happen?

Mr. BELT. I couldn't tell you the exact date, but it was during the first two or three weeks that I was employed at the hospital.

The CHAIRMAN. Did you ever say anything about that?

Mr. BELT. I did not—not to the bosses.

The CHAIRMAN. Did you ever talk about it outside?

Mr. BELT. Yes, sir; I believe I did. I didn't think it was right, and I told a couple of persons.

The CHAIRMAN. Did you ever say anything to Hawkins about it?

Mr. BELT. No; I did not.

Mr. SMYSER. You thought it was best to say nothing about that, I suppose?

Mr. BELT. Yes; I was working under Mr. Hawkins.

The CHAIRMAN. What did you leave the hospital for?

Mr. BELT. I couldn't tell you. I was not discharged. I was not given any reason at all.

The CHAIRMAN. You did not resign, did you?

Mr. BELT. I did not resign.

The CHAIRMAN. You were told to go?

Mr. BELT. I was told that they didn't need me any longer. I was taken sick on the 28th of February and stayed sick two months. In the meantime my brother went to see Doctor White. I was laying in the Government hospital then, sick, and I wasn't getting any better. I laid there about six weeks, and I didn't get better. My brother went to see Doctor White and asked him if it would be all right if he transferred me to the Garfield Hospital, in Washington. He said it would be all right, and when I got well to come back and the job would be ready for me.

The CHAIRMAN. Did you go back?

Mr. BELT. I did. I reported to Doctor Burch, and he sent me to Doctor Glasscock. Doctor Glasscock sent me to Doctor White, and he told me he didn't need me any longer.

The CHAIRMAN. What are you doing now?

Mr. BELT. I am working in Pittsburg, for the Westinghouse Electric Car Company.

The CHAIRMAN. What do you know about the food in the asylum?

Mr. BELT. Well, the food is not very good. It was not when I went there.

The CHAIRMAN. Do you mean the food that was served to the patients or the food that was served to the attendants?

Mr. BELT. The food that was served to the patients and the attendants.

The CHAIRMAN. Is the food that is served to the attendants and patients of the same kind?

Mr. BELT. Yes, sir.

The CHAIRMAN. What is the matter with it?

Mr. BELT. Well, in the first place there is not enough variety. It is the same thing night, morning, and dinner.

The CHAIRMAN. How many times do they have meat in the asylum?

Mr. BELT. We had meat nearly every day, such as it was. On Sunday evening I don't believe they had meat.

The CHAIRMAN. Did you have meat more than once a day?

Mr. BELT. We had meat three times a day, except Sunday.

The CHAIRMAN. Oh, three times a day?

Mr. BELT. Except on Sundays.

Mr. HAY. When you were on Dawes three, how many persons besides yourself were employed there?

Mr. BELT. On Dawes three?

Mr. HAY. Yes.

Mr. BELT. Three persons. There was 3 attendants and from 28 to 42 patients.

Mr. HAY. There were from 28 to 42 patients?

Mr. BELT. Yes, sir; during the time I was there.

Mr. HAY. How often did the superintendent come through Dawes 3 while you were there?

Mr. BELT. I never saw him go through Dawes 3 or any other ward.

Mr. HAY. You never saw him go through Dawes 3 or any other ward?

Mr. BELT. Except when I was laying in the hospital, in B building—the hospital ward. He walked through there one Sunday morning.

Mr. HAY. How often did you see the board of visitors? Did they ever come through this ward that you were in, Dawes 3?

Mr. BELT. I couldn't say whether they did or not. I have seen men come through Dawes 3, and I was told they were the board of visitors, but I can't say positively whether they were or not.

Mr. HAY. You did not know who they were?

Mr. BELT. No, sir.

Mr. HAY. When did you go on duty?

Mr. BELT. In the morning?

Mr. HAY. Yes.

Mr. BELT. Six o'clock.

Mr. HAY. When did you go off?

Mr. BELT. I went off at 5 o'clock in the evening, or after the evening meal, whenever it was there. The next evening I was on all night until 6 o'clock the next morning. I would work until 5 that evening.

Mr. HAY. You were on twelve hours one day and fourteen hours the next. Is that it?

Mr. BELT. Yes, sir.

The CHAIRMAN. When you say three attendants, do you mean that those three attendants did all the duty, night and day, in this ward that contained 28 to 42 people?

Mr. BELT. They did all the duty except what the patients did. The patients helped.

The CHAIRMAN. There were only three attendants on duty there?

Mr. BELT. Only three attendants.

Mr. HAY. Is this man Hawkins out there now?

Mr. BELT. I couldn't say. He was, about six weeks ago.

Mr. WALLACE. What was the effect on the patient who was struck in the stomach by Mr. Hawkins?

Mr. BELT. Why, I think he was knocked breathless. He didn't say anything for about three minutes.

Mr. WALLACE. He was knocked breathless?

Mr. BELT. Yes, sir.

Mr. WALLACE. And he did not say anything for about three minutes?

Mr. BELT. Yes, sir.

The CHAIRMAN. What do the attendants have to do besides taking care of patients?

Mr. BELT. Very often they have to clean up the grounds.

The CHAIRMAN. You mean outside of the ward?

Mr. BELT. Yes, sir.

The CHAIRMAN. Did you ever have to clean up the grounds?

Mr. BELT. It never came my turn while I was there.

Mr. HAY. Did you ever see anybody else clean up the grounds—any other attendant?

Mr. BELT. I have.

Mr. HAY. How often?

Mr. BELT. Every morning.

Mr. HAY. Every morning?

Mr. BELT. Yes, sir.

Mr. HAY. What grounds do you mean?

Mr. BELT. The grounds around the asylum—around the buildings.

TESTIMONY OF H. B. LA RUE.

H. B. LA RUE, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. What is your name?

Mr. LA RUE. H. B. La Rue.

The CHAIRMAN. Where do you reside?

Mr. LA RUE. Baltimore.

The CHAIRMAN. How long have you lived there?

Mr. LA RUE. I am from New York State. My home is in New York State.

The CHAIRMAN. Were you a patient at St. Elizabeth's?

Mr. LA RUE. I was.

The CHAIRMAN. When did you go there?

Mr. LA RUE. May 14—a year ago yesterday.

The CHAIRMAN. How long were you there?

Mr. LA RUE. I was there until August 31.

The CHAIRMAN. How did you come to go there?

Mr. LA RUE. Well, I am endeavoring to find out. There is an investigation going on.

The CHAIRMAN. Had you ever been there before?

Mr. LA RUE. I was there in 1896.

The CHAIRMAN. Do you know why you were sent there at that time?

Mr. LA RUE. Yes, sir.

The CHAIRMAN. Why?

Mr. LA RUE. Well, with the committee's permission, I do not care to take that up, because I have decided not to prosecute it, and there is big men's name that I don't want to bring out unless I am forced to.

The CHAIRMAN. All right. Where were you at the time you were sent there?

Mr. LA RUE. At Montour Falls, Schuyler County, N. Y., which has been my home for twenty years.

The CHAIRMAN. Were you an old soldier?

Mr. LA RUE. No, sir. I ran a locomotive in the Quartermaster's Department during the war, but I was never in the service.

The CHAIRMAN. Were you ever in any of the Soldiers' Homes?

Mr. LA RUE. No, sir. I have always supported myself and made money.

The CHAIRMAN. Did you go there voluntarily?

Mr. LA RUE. No, sir.

The CHAIRMAN. Did you this last time?

Mr. LA RUE. No, sir.

The CHAIRMAN. You were sent there, but you do not know anything about why it was done?

Mr. LA RUE. I don't know anything about it. I can not find out the name of the complainant.

The CHAIRMAN. What family have you?

Mr. LA RUE. Sir?

The CHAIRMAN. Have you a family?

Mr. LA RUE. I have a wife and two sons.

The CHAIRMAN. Have you any idea as to whether they caused you to be sent there?

Mr. LA RUE. They had nothing to do with it. They only heard of it indirectly, through an attendant who wrote a letter to my wife.

The CHAIRMAN. Did they not know where you had gone?

Mr. LA RUE. No; they did not know anything about me.

The CHAIRMAN. Were you taken from your home in New York?

Mr. LA RUE. No; I had not been home for six months. I am traveling all the time. I have been a traveling man all my life.

The CHAIRMAN. Where were you at the time you were taken?

Mr. LA RUE. I was here in Washington, attending the International Congress of Railroad Men.

The CHAIRMAN. You were taken to the hospital from the city of Washington?

Mr. LA RUE. Yes, sir.

The CHAIRMAN. You do not know what proceedings were had?

Mr. LA RUE. I do not know anything whatever of it. I do not know the complainant, or the process, or anything about it.

The CHAIRMAN. Were you arrested by a policeman and then taken over there?

Mr. LA RUE. Yes.

The CHAIRMAN. Were you taken anywhere just before you went to the hospital?

Mr. LA RUE. When I was arrested I was sitting along on the porch of a friend. I was all alone. The first thing I knew was a policeman jumped on the porch, took me into a wagon, and rode me to a station in the northwest—I don't know Washington very well—away in the northwest part of the city.

The CHAIRMAN. Who did you see there?

Mr. LA RUE. I saw the sergeant in charge, whoever was in charge.

The CHAIRMAN. What were the proceedings?

Mr. LA RUE. They searched me and put me in a cell.

The CHAIRMAN. How long were you in the cell?

Mr. LA RUE. Well, it was about 9 o'clock when I was arrested.

The CHAIRMAN. In the evening?

Mr. LA RUE. In the evening. I stayed there until about midnight. They took me in a patrol wagon to the first station, there by the Post-Office Department, and Captain Amiss—

The CHAIRMAN. What happened there at the first precinct?

Mr. LA RUE. They put me in a cell there until morning. You see, on the 1896 occasion—

The CHAIRMAN. I do not want the 1896 occasion. I want this occasion. You say they put you in a cell until morning. What happened then?

Mr. LA RUE. As soon as morning came I asked who was the captain, and they said Captain Amiss. I said, "Tell Captain Amiss I am here," and when he came he says, "Put that man upstairs." I didn't ask any questions. I kept dead silence. I thought: I will

answer no questions and ask none. They laughed and joked there for over an hour. They gave me a cigar or two. They had taken all my money from me, and everything, at the first station. Well, I was content. I thought if they wanted to play the fool with me I would keep still and let them. So about 10 o'clock, I think, a couple of young fellows came in—

The CHAIRMAN. Was this 10 o'clock on Sunday night?

Mr. LA RUE. Sunday morning. They laughed and chatted probably five minutes—a couple of boy doctors. I paid no attention to them. About, well, some time after that, I think after dinner, or maybe just before—they put me in the ambulance and ran me out to St. Elizabeth's. I kept quiet. I said nothing.

Mr. HAY. How long had you been in the city?

Mr. LA RUE. My headquarters at that time were over at Baltimore.

Mr. HAY. I mean how long had you been in the city?

Mr. LA RUE. I came in the evening before.

Mr. HAY. You came into the city the evening before?

Mr. LA RUE. I came in, let's see, on the night of the 12th. I came over here in the evening and stayed that night at the Hotel Regent. I don't want to get this mixed. Sunday was the 14th, and I must have come over Friday night. I stayed at the Regent that night.

Mr. HAY. You came Friday night, and Saturday evening—

Mr. LA RUE. I was arrested; yes, sir. I think it was Sunday morning; I am pretty sure it was, when I was run out to St. Elizabeth's, and they put me in the B building. That is the reception ward—very nice quarters, too. I had in my hand a copy of this Railway Age, that was published every day during the congress, you know, and which contained the proceedings of the day before. They hold those conventions every year. And in that publication was about thirty or forty letters of the previous day's mail. Part of them I had not opened. I was there quite a little while when Doctor Burch came in. I knew him from the previous occasion. We laughed and chatted for a few minutes, and suddenly three men took me and run me right straight across to the main building, into Gray Ash ward. Bob Hogan used to be the attendant. They put me in a cell there with a double door and a double lock; but I left the magazine there with the letters, and I was two months getting them letters back.

I never got the magazine, and I never got the letters back. The letters were opened and the contents taken out; but they did send me back, after a long protest, seven or eight empty envelopes. That is all I received from them. Right there, I would like to state that when my trunk came to me I had about—well, I wouldn't say the exact amount, but an inventory was taken—postage stamps, and 500 sheets of paper and envelopes. I used up the entire stamps, and wrote letters to my wife, to my bankers, attorneys, partners in business, stockholders, etc., sealed them and put them in the locked United States mail box in the administration building, and they did not reach their destination.

Mr. HAY. You say they sent your trunk. Where did they send it?

Mr. LA RUE. It came up from the Regent. My baggage was at the Regent. Not one of the letters ever reached its destination. But I did finally get a letter to my wife, through Doctor Stack's courtesy. He sent it to her. I wrote her seventeen letters, and heard not a word from it. This was four months, you know.

The CHAIRMAN. The only reason you say these letters were never received is because you never received an answer?

Mr. LA RUE. I have inquired of numbers of people since, and they have said, "I never knew where you were." I wrote three or four letters to one man, and when I saw him he said: "Where in the name of God have you been for a year? We lost all track of you."

Mr. HAY. How did you get out?

Mr. LA RUE. I don't know whether I should take that up now. I was going through the whole transaction. Finally, through the courtesy of Doctor Stack—I complained to him; I complained several times. I said: "I must get a letter to my wife." He says: "You write a letter and I will see that she gets it." So I wrote it, and he said: "You come and mail it yourself." He went with me to the private post-office in the main building, and I dropped it in the box. She communicated with my son at once. He is a lawyer in Scranton, Pa., and chief claim agent for the Delaware, Lackawanna and Western Railroad. He stands 6 feet 2 and weighs about 250 pounds. He met his mother by appointment in Washington, and came out to me.

He said: "How did you get there?" I said: "I don't know." He said: "What have you been doing? What is this for?" I said: "I have no idea. You go and see the doctor." So he went over to see Doctor Stack. I was not present then, but they went over, and he told me afterwards. This is hearsay. He said: "I want to know what there is of this." He said: "I want that man's baggage," and they came around and got my baggage in a hurry, and I got right straight out. I saw no court going in, and I saw no court going out. I signed no papers and no agreement, and I don't think they did. I think that boy of mine is too smart to sign a paper unless I see it.

Mr. HAY. Do you mean to say that after you went there you stayed—how long?

Mr. LA RUE. Four months.

Mr. HAY. And at the end of that time your son came, and you just walked out?

Mr. LA RUE. He demanded my instant release. I was not a resident of the District. I was not a lunatic, and not a pauper, and I did not belong to the Army and Navy; and as I understand the law there was no right whatever to get me in there at all legally. But that is all coming up hereafter. I am here under protest and against my will, because I am not ready for action. I never move until I am ready, and when I am ready, let them look out; but I am not ready. I am getting information, and am investigating, and I have a good number of men investigating.

The CHAIRMAN. How were you treated at the asylum?

Mr. LA RUE. In various ways. I had been there in the punishment ward, too. This Gray Ash ward is the punishment ward. Things were very different from what they were on my first visit. I never realized what a tremendous change had come over it since Doctor Godding's time. Doctor Godding, I thought, was a good man. To my knowledge I never met Doctor White, but from all I heard I think he is equally so. But Doctor Godding stood right over the hospital and everything there, and every Sunday he made it the rule of his life to see every patient himself.

The CHAIRMAN. How many patients were there when he saw them?

Mr. LA RUE. I can only quote from recollection. I think there were in the neighborhood of 2,000.

The CHAIRMAN. Do you say that in one day he saw every patient?

Mr. LA RUE. He would go in the ward, and they were dressed up, on dress parade, and he would look at them. He would stop and talk with them. There would be with him Doctor Burch and Doctor Lattimer, the chief physician at that time, and another. I think he went through all the wards. I know he went through the one I was in. Nine months I was there then, and I studied thoroughly the whole institution. I say that from what I heard that Doctor White is just as conscientious a man as Doctor Godding, but he does not go near them.

When I was there four months Bob Hogan, the chief attendant, says, "The doctor wants to see you." He took me to the office in the Center building. The doctor sat with his back to the light and I couldn't see his features. It might have been that that was Doctor White; I don't know. He didn't tell me who it was.

The CHAIRMAN. How did Hogan treat you?

Mr. LA RUE. On the start, vicious. It started right there. By going back to the record of 1896——

The CHAIRMAN. How did Hogan treat you?

Mr. LA RUE. The doctor told them to take me back, and right at the corner of the main building—Hogan was at my arm; and these other men, Hunter and Reiner and Young and Jones, they came to me next morning and told me about it—one of them jumped behind me and put his knees on the small of my back and his arm around my neck, in a strangle hold, and in a few minutes I was almost unconscious.

I fell on the sidewalk, and another one of them kicked me an inch and a half to the left of the fifth ganglionic nerve, the motor nerve. It instantly paralyzed that side, and for four days I could move neither toe nor finger on that side. They carried me in and put me on the floor of my room. A patient named Cook, who has since been discharged on habeas corpus, came and undressed me and put me to bed. I didn't see Hogan again that night. Next morning he came to my cell, and says I, "Bob, how did you come to do that?" and he said it was an order of the doctor's. I said, "Do you pretend to tell me a doctor ordered that?" He says, "Yes, sir; and I will give you the names of the four men with me." Said I, "What doctor was it?" He said, "Doctor Toner." I never saw Doctor Toner. I haven't seen him yet.

Mr. SMYSER. Can I interrupt you?

Mr. LA RUE. Certainly.

Mr. SMYSER. You have some business that you do not care to divulge?

Mr. LA RUE. Now; it is this way: In that old deal, when I looked around and saw the men that caused it they were a set of men that I could not afford to fight—big syndicates—I couldn't afford to fight them.

Mr. SMYSER. Your transactions in life have been with large companies?

Mr. LA RUE. Altogether. I secured the contract for the construction of the Brooklyn Bridge, New York, for Mr. Sellers, my president.

Mr. SMYSER. And you are connected now with large companies?

Mr. LA RUE. I am. We are now fighting the Standard Oil Company. I belong to the independent oil companies. We have an office in Baltimore. I will give you my card.

Mr. SMYSER. Have you had any trouble with the companies which you are engaged in?

Mr. LA RUE. I sold a carload of oil yesterday to the B. & O.

Mr. SMYSER. Have you any litigation?

Mr. LA RUE. Not a bit.

Mr. SMYSER. How do the hotels treat you?

Mr. LA RUE. Well, before this I got into a row with a newspaper reporter——

Mr. SMYSER. I am asking you about——

Mr. LA RUE. And that scared those people. He wrote me up. He wanted an interview, and I refused it, and he wrote me up to the queen's taste. I think that is where the thing originated. I think that is where it came from originally.

Mr. SMYSER. Your transactions you do not care to divulge at the present time?

Mr. LA RUE. Really, I have nothing to hide. Some things I would rather keep in abeyance for a while, until I get further information, and then I will go to a further tribunal.

Mr. SMYSER. How long have you been in Washington on this occasion?

Mr. LA RUE. I came this morning.

Mr. SMYSER. Did you come from New York?

Mr. LA RUE. No; from my office in Baltimore. There is my card there. I am with that company now. I bought a half interest there with Mr. Dawson. We are working for the independent refiners in lubricating oil in west Pennsylvania. I have done very nicely with it. I have been with it two months, and I have got the B. & O. Railroad to buy. I have the good will of the railroad people. I have worked all my life to do it. I can sell them anything.

Mr. SMYSER. Were you ever in business with Mr. Carnegie?

Mr. LA RUE. No, sir; with the Midvale Steel Company, when Mr. Sellers owned it. I resigned when Mr. Sellers sold out. I carried at the same time the Brooks Locomotive Works, and was with those two concerns for twenty-one years.

Mr. HAY. What is the name of your son?

Mr. LA RUE. Benjamin Franklin.

Mr. HAY. Benjamin Franklin La Rue?

Mr. LA RUE. Benjamin Franklin La Rue.

Mr. HAY. What is his address?

Mr. LA RUE. I believe they have moved into their New York office now, but a letter written to Ben Franklin La Rue or Benjamin Franklin La Rue, claim agent of the D. L. and W. road, Scranton, Pa., would find him. He knows nothing of these matters whatever. I have always been away from home.

Mr. HAY. He knows about coming out to the asylum for you?

Mr. LA RUE. Yes; he came and got me out of there.

The CHAIRMAN. You have told us all there was about your getting into the hospital the second time, have you? Was there never any court proceedings in connection with the matter?

Mr. LA RUE. Yes; that was a misapprehension on my part. I had been there about a week. On the 23d of May I was served by the United States deputy marshal with a summons to appear before Judge Clabaugh in the supreme court. I went down in the police ambulance, under charge of the police.

Mr. HAY. Was that the first or the second time?

Mr. LA RUE. That was the last time when I came there. I was rather surprised about that. I was in the hands of the United States marshal, as far as I understood. I know something of law. So I said nothing until I got there. I got to the criminal court room. I saw "criminal court" on the door and "criminal court" on the mat. It woke me up, I tell you. I saw they were going into proceedings lunatico inquirendo. When my case came up I denied the jurisdiction of the court right there. I said to Judge Gould—it was before Judge Gould—"I deny the jurisdiction of the court in my case at all. I am not a criminal;" yet they went on with the proceedings.

The two doctors had quite a long dissertation consisting of medical terms. They used lots of words that I couldn't spell. I declined to cross-examine. I said nothing. I was silent. Mr. Mudd, the bicycle policeman, testified, and I declined to cross-examine him. I ignored the proceedings entirely. They put me on the stand, and I told the judge, says I: "Your honor, I am here under protest, and I deny your jurisdiction. I have got nothing whatever to say."

The CHAIRMAN. I do not want you to go into those proceedings.

Mr. LA RUE. You asked me what court proceedings there were, and I am telling you.

The CHAIRMAN. You did have court proceedings, and were adjudged a lunatic?

Mr. LA RUE. I don't know what I was adjudged. I never heard of it afterwards.

The CHAIRMAN. What did they do with you that day?

Mr. LA RUE. I was taken right back to my cell.

The CHAIRMAN. From there you went back to St. Elizabeth's?

Mr. LA RUE. Right back to my cell, and was locked up that night.

The CHAIRMAN. That will do, Mr. La Rue.

Mr. LA RUE. It is but the beginning of a rather interesting set of proceedings, they will find before they get through with me. There was another transaction about two weeks after this. I was choked again in my cell, at 2 o'clock in the morning—

The CHAIRMAN. I do not think we care for any more testimony.

Mr. LA RUE. All right.

TESTIMONY OF LEWIS J. MARSHALL.

LEWIS J. MARSHALL, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. What is your name?

Mr. MARSHALL. Lewis J. Marshall.

The CHAIRMAN. Where do you reside?

Mr. MARSHALL. For the last three months I have been in Philadelphia since about January the 22d or 23d.

The CHAIRMAN. Have you ever been in St. Elizabeth's Asylum?

Mr. MARSHALL. I was there one year and thirteen days—from the 22d day of May, 1904, until the 5th day of June, 1905.

The CHAIRMAN. How did you come to go there?

Mr. MARSHALL. Well, sir, on May the 22d, while walking peaceably along Fifteenth street opposite the Treasury Department, a police officer on a bicycle came along the street and motioned with his finger for me to come toward him. I was on the sidewalk. He was riding along in the street. He got off his bicycle and motioned for me to come toward him. I went over and entered into a little conversation, and during that little conversation I made the statement that I expected to make a public speech down in Market space, at the junction of Pennsylvania avenue and Seventh street, at a meeting which was to be held there that afternoon. I had been accustomed to speaking there at these religious meetings, and I made the statement that I expected to do so. While we were in this conversation another officer came up.

He turned to the other officer and said: "He is going to make a speech down in the street." He says: "I think I had better take him down to the captain, had I not?" The other officer assented to it and said he thought he had better. So the officer said to me: "Come down with me, please," and I walked quietly along. He never put his hand on me. We went down to the police station near the post-office, which I think is No. 1. I went in the station house. When I went to the desk they searched my clothing. I gave him some little money I had—I think about \$6. They registered my name at the desk, by the officer in charge, and then he asked me to go up to the next floor of the police station.

I went up there, and he directed me into a cell, although he did not lock the door. There was a police officer in the corridor watching a man who was in delirium tremens, and they needed a man there to watch him. So I was not locked up, but I was just allowed my liberty to go in the cell as I chose or to come out and talk with the officer in charge. Well, I think something about like perhaps half an hour, or possibly an hour, after my detention there a man came in, dressed in a civilian suit, and asked me a few questions, and then turned and went away. During this time a number of police officers came into that part of the building, and I had some conversation with them, and they then went about their business. During the day there was three different men—this one I speak of and two others—who came in and asked me a few questions and then went away.

Those men, I afterwards found, were police surgeons. I tried to question one of them as they was running out, after I had been there a number of hours, but he ran down the stairs and would not wait for me to put any questions, saying: "You just stay there a few moments and I will be right back." Of course I was obliged to stay there, because I was under the charge of the police. During the time that I was confined there I made a request to them that they should notify my friends, who were living at 215 John Marshall place, of the fact of my arrest, that they might come down and intercede in my behalf for my release. This request was refused, or at least they did not notify my friends. I am sure of that fact. They did not say they would not, but they just simply put me off, and my friends were not notified of the fact of my arrest. I was detained there.

The CHAIRMAN. Were you——

Mr. MARSHALL. I would prefer to tell my story through, and then if you wish to question me on any point I would like to have you do so. I would prefer to do it in that way.

The CHAIRMAN. I do not want you to make it any longer than is necessary; that is all.

Mr. MARSHALL. If I tell all of the truth it will take quite a time. It might interrupt my line of thought. There is a good deal to tell——

The CHAIRMAN. Never mind; go on.

Mr. SMYSER. Do interruptions annoy you and break the thread of your story?

Mr. MARSHALL. Not particularly; but there is a great deal to tell. I was a year and thirteen days at St. Elizabeth's, and there is a great deal to tell. It does not annoy me, only it will cause a delay if I have to break the thread and begin again.

Mr. HAY. Would you mind me asking you one or two questions about things that we ought to know at the beginning of your statement?

Mr. MARSHALL. Very well.

Mr. HAY. Were you a citizen here? Was this your home?

Mr. MARSHALL. I had a residence at the time. I was not a citizen. I am not a citizen. I am a subject of Great Britain, but I was a resident of the city of Washington at that time. I had a legal residence here.

Mr. HAY. How long had you been here?

Mr. MARSHALL. Five months.

Mr. HAY. You had been here five months?

Mr. MARSHALL. I had been here five months, and I had rent receipts at the time of my arrest for three months' rent that I had paid. I had no legal residence anywhere else, so consequently my legal residence was in the District of Columbia. I remained in the police station there until, I think, about 9 o'clock in the evening. This was about 10 o'clock Sunday morning, the 22d day of May, 1904, as I have stated. I remained, I think, until about 9 o'clock in the evening, when I was taken down to the door and a wagon was backed up there, standing there at the time, and, accompanied by this officer whom I had been placed in charge of, I was taken into the wagon. I was not told of any complaint that had been made against me. I was not told where I was going to be taken. I was not given any information whatever, in any way, shape, or manner, but I was taken to St. Elizabeth's.

I arrived there, I think, about 10 o'clock in the evening, as near as I can judge. After arriving at the institution I was placed in Oak ward, which was then the receiving ward of the institution. I was given a bath and put to bed on the couch on the floor that night. The next morning, I think, the last doctor I saw was Doctor Glascock, if I am not mistaken. He came in and just made a few remarks, questioned me just very slightly; I can not recall just the remark, and perhaps it is not important anyway at this time. He went away, and soon after another doctor came to me. They were introduced to me as doctors, but I can not recall his name now. A third doctor who talked to me was Doctor Stack. I had a little conversation with him, but not very much, and he also went away.

That same evening I noticed a young man that was tied in a chair. He was set in a chair with arms to it, like this [indicating], and he was tied with a cloth. The cloth was put around him and tied behind his body. I noticed one of the attendants came in to this young man and roughly put his hand on him and told him to get up. He got up, and he grabbed him right from behind and pushed him down the hall, and when he got him down pretty near to the entrance to the bathroom he violently threw him upon the floor.

The CHAIRMAN. Do you know what that attendant's name was?

Mr. MARSHALL. I could not say positively—you understand I had only been there twenty-four hours, and I had not got the names—but to the best of my knowledge and belief his name was Allen—Bernard Allen. I can not state positively, but I learned afterwards the name, and since then I know from his description that that was the man.

The CHAIRMAN. Will you allow me to go back to the time of your arrest. At the time you say you were walking peaceably along the street when the first bicycle policeman spoke to you?

Mr. MARSHALL. Yes.

The CHAIRMAN. Were you dressed about as you are now?

Mr. MARSHALL. No, sir; I was dressed differently.

The CHAIRMAN. How were you dressed, then? You were wearing some peculiar dress?

Mr. MARSHALL. I was wearing a suit made of stripes; yes. I suppose they considered it peculiar.

The CHAIRMAN. The same character of dress as is usually put on convicts in prisons?

Mr. MARSHALL. Yes; the same character of dress.

The CHAIRMAN. That was the dress that you adopted when you made these addresses in the public streets of Washington?

Mr. MARSHALL. I had never done so.

The CHAIRMAN. But you had it on on this particular occasion?

Mr. MARSHALL. I had the suit on.

The CHAIRMAN. What was your object in wearing that peculiar garb?

Mr. MARSHALL. If I go into that it will be a long story. Of course I am willing to go into it.

The CHAIRMAN. What I want to find out is, was it to carry out some particular idea you had in connection with which you were making these speeches.

Mr. MARSHALL. No; I will state in a few words what my object in wearing the suit was. It was as a public protest which I have stated many times, and have put in print. It was a public protest against the criminal acts of the officials of the United States Government.

The CHAIRMAN. And you consequently were going around in that prison garb, so to speak, to make a public protest against the improper acts of officials of the United States?

Mr. MARSHALL. Yes, sir.

Mr. BARCHFELD. How long have you been in this country?

Mr. MARSHALL. I have been in this country twenty some years. I came here in the winter of 1877-78—

Mr. BARCHFELD. You are not a citizen of the United States?

Mr. MARSHALL. No, sir; I am not a citizen of the United States.

Mr. HAY. How did you get out of St. Elizabeth's?

Mr. MARSHALL. I had better go on with my story, and when I get to it you will see.

Mr. SMYSER. Why can you not start at the rear end and go the other way?

Mr. MARSHALL. There are some important facts to be shown that it is important, I believe, to have shown first.

Mr. SMYSER. Can you not answer Mr. Hay's question?

Mr. MARSHALL. How I got out? I simply was discharged on the 5th day of June.

Mr. SMYSER. You were discharged by the asylum officials?

Mr. MARSHALL. I was simply discharged on the 5th day of last June, 1905.

Mr. HAY. They gave you a discharge. Have you got that?

Mr. MARSHALL. I have no discharge. I was taken away from the institution. I was sent with Professor Cook, of Howard University, to Cambridge, Mass., and was there released at the home of my brother in Cambridge, Mass., on the 5th day of June.

Mr. HAY. Cambridge, Mass.?

Mr. MARSHALL. Yes, sir. I will continue my statement—

The CHAIRMAN. I think that will do.

Mr. MARSHALL. You have not heard any of my experience.

The CHAIRMAN. I think we have heard all that is necessary.

Mr. MARSHALL. I have been sworn to tell the whole truth.

The CHAIRMAN. I know; but we absolve you from any violation of your oath. We will excuse you.

Mr. MARSHALL. Yes, sir; but it is not a question of my oath. I believe the American people ought to know the whole truth.

The CHAIRMAN. It will not go out to the American people in this instance.

Mr. MARSHALL. You refuse to hear me any longer?

The CHAIRMAN. We do not wish you any longer. If you will withdraw we will be obliged to you.

Mr. MARSHALL. All right, sir.

TESTIMONY OF ALBERT C. HAYDEN.

ALBERT C. HAYDEN, being duly sworn, was examined and testified as follows:

The CHAIRMAN. What is your name?

Mr. HAYDEN. Albert C. Hayden.

The CHAIRMAN. Where do you reside?

Mr. HAYDEN. At St. Elizabeth's.

The CHAIRMAN. Are you an attendant there now?

Mr. HAYDEN. I am; yes, sir.

The CHAIRMAN. How long have you been there, Mr. Hayden?

Mr. HAYDEN. I have been there nearly thirteen years.

The CHAIRMAN. Did you go there under the civil-service regulations, or was that before the time of the civil service?

Mr. HAYDEN. No, sir; it was prior to the President's proclamation.

The CHAIRMAN. You were appointed by Doctor Godding?

Mr. HAYDEN. I was appointed by Doctor Godding; yes, sir.

The CHAIRMAN. Have you ever seen any improper conduct on the part of attendants toward patients in the hospital?

Mr. HAYDEN. I have not. I have known of it, but they were all dismissed. None ever came directly under my observation.

The CHAIRMAN. You never saw any cruel treatment of any patient?

Mr. HAYDEN. No, sir; none ever came directly under my observation.

The CHAIRMAN. And you say that in the cases you heard of the attendants were all dismissed?

Mr. HAYDEN. I know of no case of cruel treatment to patients that was not summarily dealt with, and they were dismissed. Of course, the civil-service records, I suppose, show a great many dismissals for that cause.

The CHAIRMAN. What part of the hospital are you engaged in now?

Mr. HAYDEN. I am in the Richard-on group, across the road from the main group of buildings, under the administration of Doctor Logie. He is the assistant physician there, and he has charge of that group. I work in P building.

The CHAIRMAN. What are your particular duties? Are you an attendant in one particular ward, or do you go from ward to ward?

Mr. HAYDEN. I am assigned to one ward, though I relieve from one ward to another—that is, from one ward to another or from one building to another on some days, and mostly always on Sunday. I am now in my own ward, but I am relieving in some other ward on Sundays.

The CHAIRMAN. What is your regular ward? What is the name of it?

Mr. HAYDEN. P building, 4. The wards they run by numbers. There are four wards in the building, and they are numbered 1, 2, 3, and 4.

The CHAIRMAN. Have you anything to say in regard to the food that is given to patients there at the hospital?

Mr. HAYDEN. Well, the food might be improved upon, I think. The food, while it is of a wholesome character and cooked probably fairly well, I believe there is certain things might be improved upon.

The CHAIRMAN. Did you ever see any evidence of dirt in the potatoes? A good deal has been said about that.

Mr. HAYDEN. I don't know that I have noticed it in the potatoes. I have oftentimes seen grapes served on the table with the soil that probably would be beaten on there by rain, near the ground.

Mr. SMYSER. You mean raw grapes?

Mr. HAYDEN. Raw grapes, just gathered from the vineyard and served without being washed.

The CHAIRMAN. Do you know anything about the way noisy patients are restrained?

Mr. HAYDEN. Yes; I have helped to restrain patients. I have only helped to restrain them, though, in absolutely necessary cases, as I regard, many a time, that it is to the advantage of their fellow-patients, and of the patient himself, to restrain him. The restraint partakes of perfectly humane restraint, though, and there is nothing barbarous in the restraint that is used there.

The CHAIRMAN. What are the methods of restraint that are used?

Mr. HAYDEN. We have a strait-jacket there which laces up the back, and there are long sleeves, about this long the sleeves are

[indicating], tied back, but they can be tied as loose as possible and give the patient plenty of room to work his hands about.

The CHAIRMAN. If those are put on properly it does not hurt the patient at all, does it?

Mr. HAYDEN. No, sir; not at all. I do not see how a hospital could be properly run without the use of some method of restraint, humane in character, and I regard the restraint that is used in the institution these are of a very humane character—that is, at the present time.

The CHAIRMAN. Have you been in any other institution as an attendant?

Mr. HAYDEN. No, sir; I never worked in any other institution. All my service has been given in that institution.

The CHAIRMAN. How old are you?

Mr. HAYDEN. I am 34 years of age.

The CHAIRMAN. What do you put these strait-jackets on for?

Mr. HAYDEN. They are used during unusual periods of excitement, and for such classes of mania, homicidal and suicidal mania, where the force is not adequate to keep a constant watch over these patients. These attacks of suicidal or homicidal mania may come on at any time, and the patient should be watched over. Where the force is inadequate to meet that condition we place this restraint on the patient, and even though the forces are adequate I believe it would be at all times necessary to use a restraint of a modest character.

The CHAIRMAN. How many men are there in the regular force?

Mr. HAYDEN. There are two men there.

The CHAIRMAN. How many patients are there?

Mr. HAYDEN. Thirty-two patients.

The CHAIRMAN. So that two men have practically the entire care of 32 patients?

Mr. HAYDEN. Two men have practically the entire care from 6 in the morning until 8 o'clock at night.

Mr. HAY. What kind of patients are they?

Mr. HAYDEN. Well, we have patients there of all classes—not properly all classes, but we have a great many different types of mental disturbance there. We have them probably from acute maniacal excitement to chronic cases, and they are mixed, you know.

Mr. BARCHFELD. When you apply the strait-jacket or the camisole how long do you allow it to remain?

Mr. HAYDEN. Almost invariably a man is never in restraint over two or three hours—that is, any case that has come under my immediate observation.

Mr. BARCHFELD. You never knew of a case where the strait-jacket was applied more than two or three hours?

Mr. HAYDEN. I don't know of a case where the restraint has been used longer than, I will say, four hours, at the extreme.

Mr. BARCHFELD. I was going to ask you if you knew of a case in which the strait-jacket was applied from twelve to twenty-four hours.

Mr. HAYDEN. No, sir; that is, not under Doctor White's administration. I presume you are taking evidence covering merely that period?

Mr. BARCHFELD. That is all.

Mr. HAYDEN. I don't know of the case, I think, under his administration. The maximum hours of restraint have been probably about four hours; that is, that have met with my knowledge.

Mr. HAY. Four hours at a time?

Mr. HAYDEN. About four hours' time. We have breakfast about 7 and we always give them an hour or an hour and a half for careful watching, you understand, when the duties are performed, so that the attendants can devote their special attention to these cases where restraint is necessary.

Mr. HAY. What pay do you receive?

Mr. HAYDEN. My salary is \$37.50.

Mr. HAY. It has been increased since you have been there, I suppose, of course.

Mr. HAYDEN. Oh, yes; I began at the bottom of the ladder; but I have not received an increase of salary for a great many years now.

Mr. HAY. You have not?

Mr. HAYDEN. For six years, I think, I have received the pay I am receiving at the present time, or about that time.

Mr. HAY. Are you paid the same as those who perform the same duties you do?

Mr. HAYDEN. Yes, sir; I presume I am, in one sense.

Mr. HAY. What do you mean by that?

Mr. HAYDEN. My duties are of a dual nature there. As an attendant, of course, I presume I receive the compensation that is paid attendants, but I am also a musician of some character. I don't know how proficient I am, and I play with the aggregation there that we have, known as the band. I receive for that \$2.50 per month.

Mr. HAY. Your salary is \$35?

Mr. HAYDEN. Yes, sir; for the attending duties that I do there.

Mr. HAY. Do you supervise any of the wards?

Mr. HAYDEN. No, sir; none of the supervision work comes under me.

Mr. HAY. How often does the superintendent come through the ward you are on?

Mr. HAYDEN. Not frequently, to my knowledge. I have seen Doctor White in my ward twice since the ward has been opened. I refer to it as my ward. I am not in charge of this ward, however; there is another man in charge of this ward; but I am assigned to this ward and I am there nearly all the time—practically half the time, anyway. I have known Doctor White to be in that ward since its opening last October a year ago.

Mr. HAY. Have you seen the board of visitors there?

Mr. HAYDEN. No, sir.

Mr. HAY. Do you mean to say you have not seen them there at any time?

Mr. HAYDEN. I have met with the board of visitors in the institution, but not in this particular place.

Mr. HAY. In that ward?

Mr. HAYDEN. No, sir.

Mr. HAY. They never have been in this ward?

Mr. HAYDEN. Not to my knowledge; and I think it would be safe for me to say they have never been there.

The CHAIRMAN. Have you ever heard of the patients being sent out of the ward when the board of visitors come to the asylum? Have you ever known of this being done? Have you ever done it?

Mr. HAYDEN. Not during Doctor White's administration. I presume we are giving evidence purely and simply along that line?

The CHAIRMAN. Yes.

Mr. HAYDEN. Covering his administration, I have never known it to be done.

Mr. SMYSER. You spoke of the character of the patients in your ward. You impress me as being an observant and intelligent man. Is it your judgment that there could be improvements there by the classification of patients, separating them so that you would not have so many of different character in the same ward?

Mr. HAYDEN. Yes, sir; I am decidedly under that impression, that the classification is not properly made. Now, I am not an alienist. These men supersede me in their observations.

Mr. SMYSER. I understand. You are like me. Some of us common fellows sometimes get notions that the alienists can not touch.

Mr. HAYDEN. I am of that impression, gentlemen. I am certainly of that impression—that the classification, according to my mind, is not properly made. I believe that one-half of the patients in my ward could be at another place, and by such a classification there is a lot of patients of a harmless character that could be classified and could be looked after by a very much smaller force. But we have lots of violent patients. As I have said previously, I am half the time in that ward by myself, and while my physical build would tend to disprove the fact that I am not able to handle them, nevertheless I am living in constant dread of always hurting some one or being hurt myself. I am a most humane man down in my heart. I feel I am, and I live in constant dread of some time being forced to handle a man by myself who becomes obstreperous and unruly and hurting that patient or being hurt myself, and in physical strength these men compare with any men you meet.

Mr. SMYSER. You are a humane man. Do you, in the restraint of patients, restrain them as humanely as possible?

Mr. HAYDEN. I do, sir.

Mr. SMYSER. Would you tolerate cruel treatment there?

Mr. HAYDEN. I would not, sir. I would not on the part of my brother.

Mr. SMYSER. Or anybody?

Mr. HAYDEN. No one; no, sir.

Mr. SMYSER. Would you report it if you saw it in somebody else?

Mr. HAYDEN. Yes, sir; I would certainly report any inhumane or any cruel treatment—any treatment that took the form of cruelty.

Mr. SMYSER. There may be times when it is necessary to use violence to restrain the patients?

Mr. HAYDEN. I admit it, sir; and it is made more so by insufficient help.

Mr. HAY. Mr. Hayden, you say you are frequently on your ward there by yourself?

Mr. HAYDEN. Yes, sir.

Mr. HAY. Have you ever complained to the physician in charge to the effect that you did not have sufficient assistance?

Mr. HAYDEN. I have; yes, sir.

Mr. HAY. To whom?

Mr. HAYDEN. Oftentimes I have been probably too much of a kicker.

Mr. HAY. To whom did you complain?

Mr. HAYDEN. I have complained to the physician in charge of our department. I have complained to Doctor White, and that is about all the powers that be, that I had access to.

Mr. HAY. Was there any heed given to your complaints?

Mr. HAYDEN. No, sir. Doctor White and myself had a conversation last June a year ago, or probably May. I will not be accurate about the time, but it was about May or June. He was reducing the help in some of the departments, which affected us to some extent, and he said it was to tide over a shortage in the appropriation. I told him while it worked a very serious hardship upon the employees to have to dispense with this shortage of help, we were generous enough to bide with it for the time being, provided at the beginning of the next fiscal year, which was July, covering a course of a month or two, we were very willing to meet him upon a common plane, upon broad grounds, and willingly meet this extra duty and responsibility that rested upon us, provided the help was supplied at the beginning of the present fiscal year.

Mr. HAY. Was the help supplied at the beginning of the present fiscal year?

Mr. HAYDEN. No, sir; it was a permanent reduction.

Mr. HAY. You say it worked a hardship on the employees. Does it not also work a hardship on the patients?

Mr. HAYDEN. It surely does; yes, sir. The hardship that is worked on us falls partly upon our charges.

Mr. HAY. Is it not true that from this short help you are obliged to put these restraints that you have been speaking of on the patients?

Mr. HAYDEN. Well, it becomes necessary oftentimes, where sufficient help would eliminate many of the cases, though I do not believe a restraint can be entirely eliminated in the management of this hospital.

Mr. HAY. Or any hospital.

Mr. HAYDEN. Restraint is used in all the general hospitals with certain classes of patients.

Mr. HAY. What I want to get at and what I want your opinion about is this, because you seem to know what you are talking about. If you had sufficient help, would not the restraints which you frequently have to use be obviated?

Mr. HAYDEN. They would. A great many cases where restraint is used would be eliminated with an abundance of help—that is, with sufficient help.

Mr. HAY. You say you have in your ward how many patients?

Mr. HAYDEN. Thirty-two patients.

Mr. HAY. You have only two attendants?

Mr. HAYDEN. We have only two attendants. That is the regular assignment for the ward; but I presume it will average three and four days a week, three days at least, in every week, that there is only one man on that ward from 6 in the morning until 8 at night.

Mr. SMYER. Mr. Hayden, outside of additional help there and the classification of these patients, as you have described, can you give the benefit of your observation by way of what would be necessary to improve the management of that institution, if anything?

Mr. HAYDEN. Well, to improve the management—I wouldn't hardly know how to answer that question just exactly. I know one

thing: I feel, and I am convinced, and I have been convinced for years, that there is great room for the benefiting of conditions in insane institutions, not only in the Government institution here in Washington, but throughout the States, from what I have read and what I have observed in coming directly in contact with the management of this institution; that the treatment of the insane has advanced materially during the past twenty years.

In fact, in the past ten years it has advanced more; but the conditions surrounding the lives and surrounding the environments and the attractiveness of the attendants' and nurses' work have not changed, and in order to carry on this advancement, this progress, both of those things certainly must go in hand. We need more intelligence, we need more stability in the help we receive in these institutions, in order that the progress may be carried on rightly.

MR. HAY. What is the character of the people you have there? How are they generally?

MR. HAYDEN. They are country youths coming there that never observed an insane man previous to their employment in the institution, as a rule, of course.

MR. SMYSER. That is under civil service, is it?

MR. HAYDEN. It is under a form of civil service. In 1896 the institution was placed, by a proclamation of Grover Cleveland, under the civil service. The civil-service law was made operative in this institution.

MR. SMYSER. What has been the result of placing the institution under civil service as to employees? Have you, in your observation, a better class of employees?

MR. HAYDEN. No, sir; we have not, because the conditions that existed at the institution did not meet the civil service, you understand. I don't know that I can explain that just exactly as I would like to, but my impressions are that the placing of the institution under the operations of the civil-service law did not present the conditions at the institution to the employees who could qualify before the Civil Service Commission for appointment in this institution.

MR. SMYSER. You have been there and had twelve years' experience?

MR. HAYDEN. Yes, sir.

MR. SMYSER. If you were selecting attendants there, from the result of your observation and experience and as to how patients ought to be treated, what character would you select? Would you pay any attention to the civil service or would you size up your men?

MR. HAYDEN. I would pay attention to the civil service.

MR. SMYSER. And what else would you do?

MR. HAYDEN. I don't think any stone should be left unturned to ascertain and inquire into the fitness, both the intelligence and moral character, and every characteristic that goes to make up a man.

MR. HAY. Then you mean to say that the civil-service examination is not of such a character as to enable—

MR. HAYDEN. The civil-service examination has been entirely waived there from 1897. We have had no civil-service examination there. We had it for a period of nearly a year, when the civil service, through the petitioning of Doctor Godding, who was superintendent at the time, was waived. While the institution remained under the operations of the civil-service law in every respect except

in regard to this examination, the examination was waived. There was a board appointed. I really do not know who constitutes the board, but there is a board at the hospital that gives applicants a rating upon the filling out and filing of the application—the manner in which it is made out, as to its cleanliness, etc.

Mr. HAY. You say they get young men and youths there. How would they get anybody else? How could they get anybody else?

Mr. HAYDEN. I believe if the conditions were made better we would draw the intelligent men from other institutions, as they do in all Federal employments. I believe the Federal offices get the best from the States.

Mr. HAY. You mean if the pay were increased?

Mr. HAYDEN. I believe the States should educate, probably, in a way, the people we get.

Mr. HAY. You mean if the pay were increased?

Mr. HAYDEN. And other conditions.

Mr. HAY. What do you mean by the conditions?

Mr. HAYDEN. I can not too forcibly present this to you, and I am honest in giving it to you—the hours of service. You can take any man. He may be as evenly tempered as Jonah, but he goes into this institution, you understand me, this ward, and he remains there all day long. Every bit of temperament is worked out of that man before nightfall.

Mr. SMYSER. That is, he becomes irritable?

Mr. HAYDEN. He becomes irritable. He is hardly responsible himself.

Mr. SMYSER. He can not control himself?

Mr. HAYDEN. He is hardly responsible himself.

Mr. HAY. What other conditions ought to be improved besides the hours of work for the attendants? How are you fed, and housed, and washed?

Mr. HAYDEN. We are fed fairly well. It probably could be improved. I was always used to very ordinary food myself, and I get along very well on it, but it probably could be better. The housing of the male attendants and nurses is very poor.

Mr. HAY. In what respect?

Mr. HAYDEN. They have a dormitory system of housing the male employees, and these dormitories accommodate eight and nine bed fellows, with the beds very close together. In the particular dormitory that I refer to, that comes closest to me, there are nine beds, I think, now—eight or nine, nine, I think. There is one chair in that dormitory for nine men. A man either has to sit on the bed or he doesn't sit down. In view of the fact that every moment of a man's time is used by the Government, I think the authorities couldn't go too far in surrounding him with at least homelike conditions.

Mr. HAY. Have you ever made any complaint of these conditions?

Mr. HAYDEN. I don't know that I have ever touched upon this. There has been so much that it is very hard to get around to it all.

Mr. HAY. So much what?

Mr. HAYDEN. So many things to complain of that I don't know that I have got around to it all.

Mr. HAY. What have you complained of and to whom have you complained?

Mr. HAYDEN. I have complained of the hours. I have tried to

better the conditions there. That is, I have tried to induce the authorities, previous even to Doctor White coming there—tried to induce Doctor Richardson to improve the conditions of employees there, and I could never get any action taken. Of course it was simply an appeal, and could not partake of any other nature except an humble appeal or petition to the authorities.

We are prohibited from going outside of the heads of the departments to ask for any aid or any help in changing the conditions there. I have oftentimes appealed to both Doctor Richardson and Doctor White in reference to the conditions. Doctor White I found very much opposed to any change in the hours. He said he not only would not give his consent to changing the hours, but he would fight any measure that tended to divide the responsibility at the hospital.

Mr. HAY. What do you mean by dividing the responsibility?

Mr. HAYDEN. By having an eight-hour day—of course we run twenty-fours there—it would necessitate three changes of men and women.

Mr. HAY. You mean dividing the responsibility of those in charge of wards?

Mr. HAYDEN. Yes, sir.

Mr. HAY. Or of the authorities?

Mr. HAYDEN. For instance, I went on this morning at 6 o'clock. We will take, for instance, an eight-hour system. Under that regulation of hours I would get off at 2 o'clock. Say I was in charge of a ward there and I had an assistant with me, another charge man would come on with an assistant, and so on again at 10 o'clock that night, under the operation of an eight-hour law.

Mr. HAY. So that you would have for the ward six attendants instead of two.

Mr. HAYDEN. Yes, sir. The day then would be divided in three parts—that is, twenty-four hours.

The CHAIRMAN. Mr. Hayden, is there any general room for the use of the male attendants other than this dormitory?

Mr. HAYDEN. There are other accommodations. The most of it in our department—in fact, all, with the exception of the supervisors' and one other room there—I believe is all dormitory system in our department.

The CHAIRMAN. You have no general sitting room besides this dormitory?

Mr. HAYDEN. No, sir.

The CHAIRMAN. I mean any retiring room, so that when you are all through you can have a place to sit.

Mr. HAYDEN. No, sir. Another thing is the nurses' home. That goes a great ways, probably, towards making the life better, but when they go from the ward to the nurses' home, it is merely another kind of an institution. They go into another institution. There is the same restrictions and the same restraint. There is an air that follows them throughout the service there day and night.

The CHAIRMAN. What arrangement is there in these dormitories for the keeping of your clothing?

Mr. HAYDEN. They have a wardrobe system there. Every man has a number—the way they are in our dormitory. They are situated around the walls of the room and they are constructed in the institu-

tion. There is a very nice system of wardrobes. Probably they don't afford all of the accommodations that one man would need, but they are quite roomy.

Mr. HAY. You spoke of the force you had being cut down. How long after Doctor White took charge did this take place?

Mr. HAYDEN. It took place something over a year, I might say eighteen months, after—that is, the second reduction, but in a year the first reduction occurred.

Mr. HAY. Do you mean to say the force has been cut down there on two occasions since Doctor White went there?

Mr. HAYDEN. To a certain extent. There was an occasion at the opening up of the new addition to the institution, these new buildings that have been recently constructed and put in use. At the time we opened those buildings, we lost several people there at that time. Then, again, along last June, the latter part of the fiscal year, May or June, I am not sure which, there was a further reduction.

Mr. HAY. Do you know to what extent that reduction went?

Mr. HAYDEN. I can't say exactly, but approximately I suppose probably 5 per cent; maybe 10 per cent. I don't know exactly.

Mr. HAY. Throughout the institution?

Mr. HAYDEN. Yes, sir; just previous to Doctor Richardson's death. Of course these buildings were then in an advanced state of construction, and he was a vigorous man. He was looking after the opening of these new buildings, and in a report to the Secretary of the Interior—I think that is a matter of record—he asked for an appropriation for an additional 100 nurses and attendants to open up this new addition to the hospital.

Mr. HAY. Do you mean to say when the new addition was opened up instead of the attendants being increased they were cut down?

Mr. HAYDEN. Instead of increasing the force it was reduced, if anything.

The CHAIRMAN. Mr. Hayden, besides the strait-jacket there is another method of restraining people, is there not, by what you call cuffs?

Mr. HAYDEN. Yes, sir; there is a handcuff. It is simply a strap of leather that goes around the wrist, with a staple here [indicating]. There are two of these cuffs, one on either wrist. Then there is a strap goes around, and that buckles behind. He has play of his arms that way [indicating] around this strap.

The CHAIRMAN. That does not hurt the patient when it is put on, does it?

Mr. HAYDEN. No, sir; I don't think, gentlemen, that there is any restraint that is used in that hospital to-day that partakes of the nature of cruelty at all. You can't conduct that institution without some form of restraint, so long as it is humanely administered, as it is to-day.

The CHAIRMAN. Sometimes you have put these cuffs on patients, have you not?

Mr. HAYDEN. Yes, sir; I have.

The CHAIRMAN. For the purpose of properly restraining them?

Mr. HAYDEN. For the purpose of properly restraining them, protecting them, and protecting their fellow-patients.

Mr. BARCHFELD. You say you have been thirteen years at the institution?

Mr. HAYDEN. Practically; that is, thirteen years and a half, or more—something like that.

Mr. BARCHFELD. You are now 34 years of age?

Mr. HAYDEN. Yes, sir.

Mr. BARCHFELD. Are you married?

Mr. HAYDEN. No, sir.

Mr. BARCHFELD. What was your rate of wage—your salary—when you went in there?

Mr. HAYDEN. My rate of wage was \$13 per month.

Mr. BARCHFELD. What was your occupation previous to entering the institution?

Mr. HAYDEN. I was a farmer; that is, I was born and raised on a farm.

Mr. BARCHFELD. You had no other occupation?

Mr. HAYDEN. I had no other trade; no, sir.

Mr. BARCHFELD. You say your hours of work are one day twelve hours, from 6 to 6, and the next day you are on from 6 to 8 in the evening?

Mr. HAYDEN. Yes, sir; they average like that. Then again, during six months in the year there is a chapel season—that is, an amusement season—consisting of dancing and shows that come there. Oftentimes it devolves upon me to be up attending to my duties as late as 11 o'clock, playing there in the orchestra. I work then practically continuously from 6 o'clock in the morning until 11 o'clock at night, making a day of seventeen hours. I get up the next morning at 6 o'clock and observe my duties as usual.

Mr. BARCHFELD. Tell us about this recreation or amusement season.

Mr. HAYDEN. It begins on Thanksgiving Day.

Mr. BARCHFELD. And lasts how long?

Mr. HAYDEN. It operates two nights in a week. Tuesday night is always a dance night and on Friday night we usually have a play of some character. That runs from Thanksgiving Day until the 1st of May.

Mr. BARCHFELD. What recreation, if any, outside of this particular season from Thanksgiving Day up until May do the attendants have?

Mr. HAYDEN. I don't just catch that question.

Mr. BARCHFELD. I say outside of this particular season, when you have this dance on Tuesday night and a play on Friday night, what other sources of recreation have the attendants, the nurses, or the help?

Mr. HAYDEN. The attendants and nurses have none, only what they provide for themselves. The hall Doctor White has given to them on several occasions to hold their dances in, and all of their amusements that they have got in the institution consist of simply one or two dances a winter.

Mr. BARCHFELD. Do you leave the institution daily for your little constitutional walk or exercise?

Mr. HAYDEN. Only with my charges. We don't leave the institution. Of course this all takes place in the institution grounds. We go daily, and twice a day, for a walk.

Mr. BARCHFELD. How far do you walk each time?

Mr. HAYDEN. I presume we walk 2 miles. Then we sit down a while. We would probably be out about two hours, and probably an hour of it will be used in the walk.

Mr. BARCHFELD. You say there are 32 patients in your ward?

Mr. HAYDEN. Thirty-two patients; yes, sir.

Mr. BARCHFELD. And you have two attendants?

Mr. HAYDEN. There are two on there, but at least half of the time there is only one.

Mr. BARCHFELD. Who does the work at night?

Mr. HAYDEN. There is a night man comes on at 8 o'clock. Well, he doesn't come particularly on this ward, but he has another ward on the same floor, and about eleven nights in the month he has the whole building, four wards, with about 160 patients.

Mr. BARCHFELD. You think the system could be improved by putting two men on for eight hours each?

Mr. HAYDEN. Yes, sir; I think it could be.

Mr. BARCHFELD. To start, say, at 6 o'clock in the morning?

Mr. HAYDEN. And then by not controlling their time after they have finished their day's work, every shift of employees would be capable of taking care of itself. After working seventeen hours, of course there is no question about it that I need all that time for sleep. Nevertheless, there is a man that is watching over me to see whether I go to my room, and practically twenty-four hours of a man's time is controlled. It is the same as I say about the nurses' home. When anyone goes to a nurses' home it is another kind of institution. There is no relaxation at all. It is a continuance of institutional life, and the air of restraint is prevalent at all times. The wage scale is really not as good as when I went to the institution thirteen years ago. For instance, at that time I reached \$25 in one year. That is, the first six months of my service I worked for \$18. The second six months I worked for \$20. At the end of twelve months I was given \$25. It takes a man now two years of continuous service to accomplish what I accomplished in one year nearly thirteen years ago.

Mr. BARCHFELD. Do you think it is absolutely necessary, according to your proposed system of eight hours, say, having two men from 6 o'clock in the morning until 2 in the afternoon, and two men from 2 o'clock in the afternoon until 10 o'clock at night—do you think it would be absolutely necessary, for the welfare of the institution, to have two men on from 10 o'clock at night until 6 o'clock in the morning?

Mr. HAYDEN. No, sir; at the time the patients are in bed it can run with at least half the force, and in some instances probably a little less; but it can be run with half, because the patients are all in bed at that time, and most of them are of a certain class. In the hospital wards the patients need the nurses' and attendants' attention often during the night, but I believe there is a difference even at night on hospital wards and on chronic wards. I don't think they need the same help they do during the daytime.

We have the meals to serve, we have the bathing to look after, and every detail of the hospital work, ward work, and the clothing, to see that they are properly clothed at all times. The night man of course simply looks after their immediate wants, notes how they sleep, and if there is one disturbed they try to quiet him or notify the doctor in charge of his condition.

Mr. BARCHFELD. How often do you bathe the patients?

Mr. HAYDEN. We bathe the patients once a week—that is, ordi-

narily. We bathe patients as often as required. Ordinarily cleanly patients do not require a bath more than once a week, probably, but other patients require it every day. It is just as they require it.

Mr. BARCHFELD. They have all the time in the world to give them their baths?

Mr. HAYDEN. Yes, sir; they have abundance of time.

Mr. BARCHFELD. Did you ever use the same water for two different patients?

Mr. HAYDEN. We couldn't do that if we tried to. It is a shower-bath system we use, and we couldn't collect it over again. We can't do that.

Mr. BARCHFELD. Do you know of any institution having a ratio of 1 attendant to 6 patients?

Mr. HAYDEN. I haven't prepared any data to give you the benefit of. I don't really know if any institution has that ratio.

Mr. BARCHFELD. That is practically what your system would amount to.

Mr. HAYDEN. I don't think so.

Mr. BARCHFELD. You say you want two men to serve for eight hours?

Mr. HAYDEN. I thought you said our system at the present time.

Mr. BARCHFELD. No; the system you propose.

Mr. HAYDEN. Well, probably that would be an expensive system, but still at the same time we are looking for the best in the treatment of insane patients that are committed to the Government charge.

Mr. BARCHFELD. That is true.

Mr. HAYDEN. They have merited this treatment, and probably through no cause of their own they have lost their mental caliber, their reason, and they have come to us. I think that probably would not be anything but what is very nearly right, though it is for you to judge after you have heard all the other testimony there is.

Mr. BARCHFELD. Did you ever scan any of the reports from any other insane asylum?

Mr. HAYDEN. I have read several reports from other institutions, but I am really not prepared to quote from them.

Mr. BARCHFELD. Is it not a fact that this institution has as great a ratio of help as any in the country?

Mr. HAYDEN. I am not prepared to answer that question. I am not in a position to answer as to the ratio of help; but there are several institutions that have a much larger wage scale and different conditions.

The committee, at 12.30 o'clock p. m., took a recess until 2 o'clock p. m.

AFTER RECESS.

The committee reassembled at the expiration of the recess.

TESTIMONY OF ORLANDO H. M'KNIGHT.

ORLANDO H. McKNIGHT, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. Mr. McKnight, What is your full name?

Mr. McKNIGHT. Orlando Henry McKnight.

The CHAIRMAN. Where do you live now?

Mr. McKNIGHT. I am living in Baltimore.

The CHAIRMAN. When were you at St. Elizabeth's hospital?

Mr. McKNIGHT. I was there three times. I was first employed there in 1898 as a painter under Doctor Godding. Afterwards I was appointed an attendant.

The CHAIRMAN. When were you an attendant?

Mr. McKNIGHT. In 1899. In 1898 I was a painter under Doctor Godding, and Doctor Godding had me appointed an attendant the following year.

The CHAIRMAN. Have you ever been there since Doctor White has been in charge?

Mr. McKNIGHT. I have been a patient there—sent there from the Soldiers' Home.

The CHAIRMAN. What Soldiers' Home were you in?

Mr. McKNIGHT. Two. I was three years in the Dayton, Ohio, Soldiers' Home and three years at Hampton, Va., and I was sent from Hampton, Va., by the governor, out of personal spite.

The CHAIRMAN. When were you sent to St. Elizabeth's?

Mr. McKNIGHT. The 6th of May, 1905.

The CHAIRMAN. How long did you remain in St. Elizabeth's?

Mr. McKNIGHT. I remained there since the 6th of last May, a year ago, until the 11th of September. Then I ran away.

The CHAIRMAN. So you were there from May to September?

Mr. McKNIGHT. Yes, sir; then I was kidnapped and brought back from Philadelphia.

The CHAIRMAN. When did you go back there?

Mr. McKNIGHT. I came back there the 11th of November.

The CHAIRMAN. How long did you remain after that?

Mr. McKNIGHT. Until the 15th of April, last month.

The CHAIRMAN. Then you ran away again?

Mr. McKNIGHT. Yes, sir.

The CHAIRMAN. You say you came from the Soldiers' Home?

Mr. McKNIGHT. I was committed by the governor—Governor Thompson—of the Hampton Soldiers' Home, Hampton, Va.

The CHAIRMAN. How long did you say you had been in that Home?

Mr. McKNIGHT. Three years, and three years previous to that in the Dayton Home, and Senator Penrose, from Pennsylvania—I am from Philadelphia, the Third Regiment in the Spanish War, Company D—he had me transferred after three years in Dayton to Hampton, and I was three years in Hampton—six years in a Soldiers' Home.

The CHAIRMAN. What sort of treatment did you receive in St. Elizabeth's Asylum?

Mr. McKNIGHT. Rotten, brutal treatment.

The CHAIRMAN. By whom?

Mr. McKNIGHT. By the attendants. I was choked and wrung out, what they call by the toweling process.

The CHAIRMAN. Did that happen often?

Mr. McKNIGHT. I have seen it happen several times. I resigned on account of it.

The CHAIRMAN. I am not talking about the time when you were an attendant, but when you were a patient.

Mr. McKNIGHT. Yes, sir; and in the Home 4 building I have

heard the attendant that choked me threaten to wring out a hundred old soldiers.

The CHAIRMAN. What was the name of the man who choked you?

Mr. McKNIGHT. Attendant Price, Home 4 building, in the bull pen.

The CHAIRMAN. How many times did he do it to you?

Mr. McKNIGHT. I will tell you how it occurred—

The CHAIRMAN. How many times did he do it to you?

Mr. McKNIGHT. Once, but he threatened to do it a hundred times, and I told him if he done it again he would never do it to another man, because I had a knife after that to fix him.

The CHAIRMAN. You had a knife?

Mr. McKNIGHT. Afterwards; a case knife—a broken off case knife.

Mr. SMYSER. Did you use it?

Mr. McKNIGHT. No, sir; I did not, but I would have used it if he had ever done it again.

Mr. SMYSER. Would you have used it?

Mr. McKNIGHT. No, sir; I only done it for a bluff.

The CHAIRMAN. His threat of choking you again, and your threat of using the knife were both bluffs. Was that probably it?

Mr. McKNIGHT. No; I have been choked. He jumped on my back. He put his knee in the middle of my back and got his arm around my neck this way [indicating] and throwed me back.

The CHAIRMAN. What did he do it to you for?

Mr. McKNIGHT. For nothing at all.

Mr. SMYSER. What had you been doing?

Mr. McKNIGHT. I had done nothing, only going to my bed across the corridor. I happened to get in his way as he come down the corridor, and he says: "Get the hell out of my way." I didn't get out of his way quick enough, and he jumped on me and choked me. He jumped on my back and stuck his knee in the middle of my back and put his elbow or his arm around my throat and pulled me back.

Mr. SMYSER. Did anybody see that?

Mr. McKNIGHT. Yes.

Mr. SMYSER. Who saw it?

Mr. McKNIGHT. Mr. Mudd saw it, but he said afterwards he thought he was fooling.

The CHAIRMAN. Did you complain?

Mr. McKNIGHT. I did—to Dr. White personally.

The CHAIRMAN. What did he say about it?

Mr. McKNIGHT. He didn't say anything. He said: "I don't want to know about that. I didn't ask you about that." That was in a personal interview with Dr. White.

The CHAIRMAN. Had Dr. White sent for you?

Mr. McKNIGHT. He had, sir. Dr. Hummer notified me that Dr. White wanted to see me, and I was taken over to see Dr. White.

The CHAIRMAN. What did Doctor White want to see you about?

Mr. McKNIGHT. He wanted to see me about a discharge. Surgeon-General Wyman had had me appointed an attendant, and he recommended Doctor White to discharge me, and he wouldn't have anything to do with me if I was able to take care of myself—able to make a living. He asked me what wages I could make outside. I got a thousand dollars a year as a letter carrier in the Philadelphia

post-office previous to that for three or four years. I am able to take care of myself—support myself.

Mr. HAY. What is your occupation?

Mr. McKNIGHT. I am a painter.

Mr. HAY. Are you engaged in your trade now?

Mr. McKNIGHT. Yes, sir.

Mr. SMYSER. Do you contract for yourself—take jobs?

Mr. McKNIGHT. Yes, sir; kalsonining, frescoring, and painting.

Mr. SMYSER. I understand that Doctor White examined you to see if you were able to take care of yourself?

Mr. McKNIGHT. That is, I requested Surgeon-General Wyman to have me transferred to the Soldiers' Home—have me sent back there—and Doctor White said: "Are you able and capable of making a living?" Instead of sending me back to the Soldiers' Home, he said: "Why don't you go out to make a living?" And he discharged me, and I told him I would.

The CHAIRMAN. When did Doctor White discharge you?

Mr. McKNIGHT. He didn't discharge me. He paroled me, and after he paroled me, I escaped. I ran away.

Mr. SMYSER. Do you know anything about whether they keep people over there who are simply not able to make a living?

Mr. McKNIGHT. I do.

Mr. SMYSER. Or do you know anything about that?

Mr. McKNIGHT. I do.

Mr. SMYSER. That is, you mean to say persons who have nothing the matter with them mentally, but who are not able to make a living are kept in the hospital?

Mr. McKNIGHT. Yes, sir; I had 41 patients in my ward—Toner ward—when I was attendant there, and I know some of them were men just as capable and able-bodied men, able to make a living, soldiers the same as I was, and they kept them there instead of discharging them.

The CHAIRMAN. Did you have any trouble with any patients when you were an attendant there?

Mr. McKNIGHT. No, sir; I resigned under Doctor Godding on account of being compelled by the head attendant to choke them and wring them out. He told me if I didn't do it, he would do it to me. The head attendant told me that when I was there—that he would give me my medicine the same as the patients, so I resigned on account of it.

Mr. WALLACE. Who told you that?

Mr. McKNIGHT. The head attendant of Toner ward.

The CHAIRMAN. That was when Doctor Godding was there?

Mr. McKNIGHT. Yes, sir; Doctor Godding, in 1899, after I was discharged from the Spanish war in 1898.

Mr. SMYSER. Are you earning your own living now?

Mr. McKNIGHT. Yes, sir; and I am capable of doing it. I am an able-bodied man.

Mr. SMYSER. Able to take care of your money?

Mr. McKNIGHT. Yes, sir; I have \$1.100 coming to me from the Post-Office Department for overtime when I was a letter carrier.

The CHAIRMAN. You say you have \$1.100 coming to you now?

Mr. McKNIGHT. I have, sir; for overtime, you know. The appropriation hasn't passed the Senate yet. There is a bill to pay us back

to 1868, since the eight-hour law went into effect. They paid us back to 1888. My time of service was from 1882 to 1888. They haven't reached my claim yet. Senator Penrose says he is going to try to get through an appropriation bill to pay us back to 1868.

Mr. HAY. 1888, you mean.

Mr. McKNIGHT. They paid us back to 1888, but they want to pass an appropriation bill to pay us back to 1868, when the eight-hour law went into effect.

The CHAIRMAN. Have you talked personally to Senator Penrose recently about this?

Mr. McKNIGHT. Yes, sir; he had me appointed.

The CHAIRMAN. I say, have you talked to him about this over pay?

Mr. McKNIGHT. Yes, sir; he is chairman of the Post-Office Committee.

Mr. HAY. You say when you complained to Doctor White of the treatment you had received there, he refused to hear you?

Mr. McKNIGHT. He didn't refuse to hear me. Doctor Hummer had influenced Doctor White to not hear about this, because I reported it previously to this to Doctor Hummer—R. C. Hummer, of the bull pen. He paroled me out in the bull pen, and I hadn't had any talk with Doctor White previous to that; but when I went there in the presence of Doctor Hummer, Doctor White said he didn't ask me about that. I complained to Doctor White personally, then, and he said: "Well, I didn't ask you about that," surmising or supposing that he didn't want to know about it.

Mr. BARCHFELD. You say the Government owes you \$1,100?

Mr. McKNIGHT. Yes, sir.

Mr. BARCHFELD. For back pay?

Mr. McKNIGHT. Yes, sir.

Mr. BARCHFELD. What for?

Mr. McKNIGHT. Overtime—twelve hours a day. I worked over eight hours for four years.

Mr. BARCHFELD. What years were you working for the Government?

Mr. McKNIGHT. From 1882 to 1886.

Mr. BARCHFELD. Had the eight-hour law been passed in 1882?

Mr. McKNIGHT. The eight-hour was passed in 1868.

Mr. BARCHFELD. And they reimbursed all those who worked overtime from 1868 to 1882?

Mr. McKNIGHT. No; from the present time back to 1888. They have got to pass another appropriation bill to reach back to 1868, to cover my claim, before I can get it. The Postmaster-General acknowledged my claim.

Mr. HAY. As I understand you, then, they have been paying some of these claims each year?

Mr. McKNIGHT. Yes; back as far as the appropriation ran out, to 1888, and as soon as the new appropriation bill is passed, they will pay back to 1868.

The CHAIRMAN. Whereabouts were you kept in the asylum?

Mr. McKNIGHT. Sir?

The CHAIRMAN. Where were you confined in the asylum? What ward were you in?

Mr. McKNIGHT. I have been in the receiving ward, and B building, and I was in—

The CHAIRMAN. I mean the last time you were there.

Mr. McKNIGHT. I was in the bull pen. That is a building inside of a great inclosure. It is fenced around, and they give you a little breathing place outside the building.

The CHAIRMAN. The place you call the bull pen is an enclosure of something like seven or eight acres, is it not, surrounded by a picket fence?

Mr. McKNIGHT. Yes, sir.

The CHAIRMAN. They have several buildings there?

Mr. McKNIGHT. Yes, sir.

Mr. SMYSER. Were you sent from the Hampton Home for a violation of the law of the Home?

Mr. McKNIGHT. No, sir.

Mr. SMYSER. Or because they thought there was something the matter with you mentally?

Mr. McKNIGHT. No, sir; it was a personal matter between me and the governor.

Mr. BARCHFELD. What was the personal matter between you and the governor of the Home?

Mr. McKNIGHT. I was the agent for the Harris fire escape, and while I was there I got a sample sent to my sister. She received it here in Washington after I had left there. I told the governor I was going to sell them while I was a member of the Home. He said: "Well, I couldn't do it while I was a member of the Home; that I couldn't transact no outside business. I did it in spite of him. He got hold of this sample. I sent it to my sister and she got it sent back to the governor. He has been away from there since the first of the year, and he never sent the sample back. The person who owned the fire escape wanted to know if I still had the sample there, and I told him the governor had sent it up to my sister, and he left the Home the first of the year and taken the fire escape with him—stole it. He has never returned it.

Mr. HAY. What was his name?

Mr. McKNIGHT. Governor William Thompson. The firm wrote me that he had never returned it to them.

Mr. BARCHFELD. Did you sell any of these fire escapes?

Mr. McKNIGHT. Yes, sir. I asked orders in Norfolk, Hampton, Newport News—right in the vicinity.

Mr. BARCHFELD. Was it a good fire escape?

Mr. McKNIGHT. It was a cable ladder; just a small thing, that sold for \$20. I took orders from hotels. It was an individual fire escape for each room, to have in hotels. I was appointed their agent.

Mr. HAY. Did you see any other instances of cruelty besides those practiced on yourself?

Mr. McKNIGHT. Yes, sir; I have seen men knocked down. I have seen an attendant by the name of Leaflet, in B second—I have seen him knock a man down in bed, a sick man, and black his eye, and if he would raise up in bed—sit up—he would knock him right down.

Mr. HAY. What was his name?

Mr. McKNIGHT. Leaflet, in Allison B.

Mr. HAY. You say you reported that to Doctor White?

Mr. McKNIGHT. I did, to Doctor Hummer. I am not quite sure that I did to Doctor White.

Mr. HAY. You reported it to Doctor Hummer?

Mr. McKNIGHT. Yes, sir; and the head attendant gave me his keys to unlock the doors and let the patients in and out, which is against the rules of the institution.

Mr. HAY. You reported that to Doctor Hummer?

Mr. McKNIGHT. Yes, sir; and he told me he would discharge the man for it, and it wasn't true. He was still there when I left. Doctor Hummer said he would discharge him for it—R. H. Hummer, of Accident Hall. My sister will testify she sent that fire escape.

The CHAIRMAN. Have you a pension from the Government?

Mr. McKNIGHT. No, sir; not yet. I am entitled to a pension. I have made application for a pension, but I haven't got it yet.

The CHAIRMAN. When did you make the application?

Mr. McKNIGHT. I made it in 1899, after the Spanish war.

The CHAIRMAN. What was the ground of your applying for a pension?

Mr. McKNIGHT. General disability, kidney disease; and I had this when I went to the hospital, but Doctor Hummer never gave me nothing for it. He refused to give me even warm water bottles to put to my back at night. He refused to give me any treatment at all. All I got was a dose of salts when I was bound up. That is all I ever got out of Doctor Hummer.

The CHAIRMAN. Were you in the hospital?

Mr. McKNIGHT. I was; in Allison B.

The CHAIRMAN. Were you in a hospital ward?

Mr. McKNIGHT. When I went back, I was. I treated the patients in the hospital ward when I was attendant there under Doctor Goddard, the Toner Building. I had 40 bed patients. I used to treat them kindly, but when I found out I had to use brutality I resigned. They told me if I didn't wring them out and choke them they would wring me out and choke me.

Mr. BARCHFELD. Who were those orders issued by there?

Mr. McKNIGHT. By the head attendant.

Mr. BARCHFELD. Under Doctor Godding?

Mr. McKNIGHT. Yes, sir.

Mr. BARCHFELD. You never served, though, under Doctor White?

Mr. McKNIGHT. Not as an attendant. I served under Doctor Godding as painter and attendant, but under Doctor White I was a patient.

TESTIMONY OF MRS. KATHERINE C. GOODRICH.

Mrs. KATHERINE C. GOODRICH, being duly sworn, was examined and testified as follows:

The CHAIRMAN. What is your full name, Mrs. Goodrich?

Mrs. GOODRICH. Katherine C. Goodrich.

The CHAIRMAN. Where do you reside?

Mrs. GOODRICH. I am now in Alexandria County, Va. My home is Troy, Ohio.

The CHAIRMAN. Did you ever live at St. Elizabeth's?

Mrs. GOODRICH. No, sir.

The CHAIRMAN. Did you ever visit there?

Mrs. GOODRICH. Yes, sir.

The CHAIRMAN. Whom did you visit?

Mrs. GOODRICH. Quite a number of people.

The CHAIRMAN. Did you have any relatives there?

Mrs. GOODRICH. No, sir.

The CHAIRMAN. Did you have any friends there?

Mrs. GOODRICH. Yes, sir; quite a number of them.

The CHAIRMAN. When did you visit the hospital?

Mrs. GOODRICH. Off and on for four or five years. Not for a year.

The CHAIRMAN. You mean you have not been there for a year?

Mrs. GOODRICH. I was refused admittance. I couldn't go there.

The CHAIRMAN. When were you refused admittance?

Mrs. GOODRICH. A little over a year ago.

The CHAIRMAN. By whom?

Mrs. GOODRICH. Doctor Stack.

The CHAIRMAN. Do you know why?

Mrs. GOODRICH. He said I wasn't good enough to associate with the patients.

The CHAIRMAN. Is that what Doctor Stack said?

Mrs. GOODRICH. He thought it was to their advantage that I wasn't there, is one reason.

The CHAIRMAN. Did you go on this particular occasion to see one particular patient?

Mrs. GOODRICH. I went on that occasion to see one patient; yes, sir.

The CHAIRMAN. Who was the patient?

Mrs. GOODRICH. Lewis J. Marshall. Oh, I beg your pardon; two patients—Lewis J. Marshall and A. N. Willis.

The CHAIRMAN. Were you here this morning?

Mrs. GOODRICH. I was out in the corridor.

The CHAIRMAN. You mean the Lewis J. Marshall who gave testimony here?

Mrs. GOODRICH. I didn't hear him give testimony.

The CHAIRMAN. Did you ever see any ill treatment of patients in the asylum?

Mrs. GOODRICH. Yes, sir.

The CHAIRMAN. By whom?

Mrs. GOODRICH. I presume they were their attendants. I didn't know the men who was with them.

The CHAIRMAN. When did you see any bad treatment?

Mrs. GOODRICH. Well, three winters ago this winter, several times.

The CHAIRMAN. You mean in the latter part of 1903?

Mrs. GOODRICH. During the snowstorm.

The CHAIRMAN. Was it in 1903 or 1902?

Mrs. GOODRICH. I think it was in 1903.

The CHAIRMAN. Who was the superintendent at that time? Do you know?

Mrs. GOODRICH. Doctor White.

Mr. HAY. Was it two years ago this winter? Is that what you said?

Mrs. GOODRICH. Two years this winter back; yes, sir.

Mr. HAY. That was 1904.

The CHAIRMAN. What ill-treatment did you see on these occasions you speak of?

Mrs. GOODRICH. Shall I describe it in my own language?

The CHAIRMAN. That is what we want.

Mrs. GOODRICH. I was in the back grounds. I was prompted to look around and see what was out there, for the surroundings were so beautiful and clean on visitors' day inside.

The CHAIRMAN. Had you ever been there on visitors' day?

Mrs. GOODRICH. Quite frequently. I found a gang of old men, principally old men, out taking an airing. I don't remember the number at that time, but quite a number, and I saw one of them stumble. I saw a man who was behind him—I suppose an attendant; he was a stranger—I saw him kick him and beat him and curse him, calling him vile names, and he told him to get up and go on or he would kill him. The old man was so feeble that it was a wonder to me he could walk, because the snow was quite deep and it was bitter cold.

I was wrapped up in a heavy fur cape and was very cold, yet these old men were ill clad, and this one especially more so than some of the others. He had a ragged old overcoat on, and a pair of pants I should think that were 6 inches too short for him, and when he stepped the snow came up on his bare legs. There were no stockings that I could see to protect him. His overcoat was very shabby. He had upon his old gray locks a straw hat, and it cut me very much to the heart. I had a father that had gray hair and I loved him.

The CHAIRMAN. Did you ever make any complaint with regard to this to anybody?

Mrs. GOODRICH. No, sir; I didn't know anyone to go to.

The CHAIRMAN. How did you happen to be there on that particular day? Had you been there just as a casual visitor, or had you gone to see some one?

Mrs. GOODRICH. I had often been there as a visitor, and that day I know it was visitors' day, where we could see the wards so beautiful and clean, and I had an idea that they were not all clad as nice as those I seen in the wards. Being a newspaper reporter in my former life I was inclined to find out what was going on on the outside. I had heard from many of them there of their ill treatment, and I wanted to verify it by sight.

The CHAIRMAN. Where were you a newspaper reporter?

Mrs. GOODRICH. I was a reporter on my own and my husband's newspapers at Troy, Ohio, the Daily Trojan and the Troy Chronicle.

The CHAIRMAN. Do you know of other evidences of cruelty which you saw there?

Mrs. GOODRICH. I saw several cruel acts while they was on the out-ings; yes, sir.

The CHAIRMAN. On that same day?

Mrs. GOODRICH. No, sir; not that day. I was there many times. I couldn't tell you the number of times. I made it my business then to investigate it.

The CHAIRMAN. Did you ever write accounts of this for any newspaper?

Mrs. GOODRICH. No, sir; I haven't corresponded with any newspaper since the death of my husband, excepting my own sheet. I am the widow of Charles H. Goodrich.

Mr. HAY. You say you saw other evidences of cruelty?

Mrs. GOODRICH. Yes, sir.

Mr. HAY. When was that? After this one you described a moment ago?

Mrs. GOODRICH. I saw circumstances similar to that, any more than the man was not kicked. I saw them thrash through the backwoods there on visiting day, while the ward was being investigated by the

public, half clad and condemned because they couldn't keep pace one with another.

Mr. HAY. Was that before this other incident you have spoken of or afterwards?

Mrs. GOODRICH. Afterwards, sir.

Mr. BARCHFELD. You say you went to the institution to visit one Lewis F. Marshall?

Mrs. GOODRICH. Lewis J. Marshall, and other people before ever Lewis J. Marshall was there.

Mr. BARCHFELD. How long had you been visiting the institution?

Mrs. GOODRICH. I visited the institution for several years before Lewis J. Marshall was there, to see one Mary Brown, since discharged.

Mr. BARCHFELD. Is Lewis J. Marshall related to you directly or indirectly, in any manner?

Mrs. GOODRICH. Only through church relations, sir.

Mr. BARCHFELD. What church does he attach himself to?

Mrs. GOODRICH. I couldn't tell you, sir; but I know that he serves God. That is the way I put it.

Mr. SMYSER. Were you members of the same church, or did you simply entertain the same religious views?

Mrs. GOODRICH. We entertained the same religious views, and then, to a great extent, I personally felt under obligations to Lewis J. Marshall for his extreme kindness to one whom I loved.

Mr. BARCHFELD. Did you ever see any one abuse Lewis J. Marshall while you were there?

Mrs. GOODRICH. Oh, no; they was decidedly polite to him in my presence.

Mr. BARCHFELD. Did he ever complain to you that he was abused?

Mrs. GOODRICH. No, sir.

Mr. SMYSER. I don't suppose you asked him about how he was treated there, did you?

Mrs. GOODRICH. Oh, I did, very often. I was interested.

Mr. SMYSER. But he never complained to you?

Mrs. GOODRICH. He never complained. His statement, if I am permitted to give it, was that those who were able to take care of themselves were treated kindly, and those who were afflicted received the ill treatment.

Mr. BARCHFELD. What was the matter with this Mary Brown, whom you say has since been discharged?

Mrs. GOODRICH. I couldn't tell you what was the matter with her. I became acquainted with her through her brother, who was an intimate associate of my husband, Private J. M. Dalzell, and J. M. Dalzell was an inmate of my home in Ohio for many years; and at his request and at the daughter's request, Mary Brown, who is now insane and over at St. Elizabeth's, the last time I knew of her, I went to see the mother.

Mr. BARCHFELD. The mother was discharged, but her daughter is there now as a patient?

Mrs. GOODRICH. I believe so; yes, sir. Dalzell was my husband's classmate at college.

The CHAIRMAN. You say Mary Brown was a sister of Dalzell?

Mrs. GOODRICH. Yes, sir.

Mr. BARCHFELD. Do you reside in the District now?

Mrs. GOODRICH. I reside in Alexandria County, Va., at Liberty Home.

Mr. BARCHFELD. How long have you resided there?

Mrs. GOODRICH. Since February 10.

Mr. BARCHFELD. This last year?

Mrs. GOODRICH. This year.

Mr. BARCHFELD. And all the while you were visiting St. Elizabeth's you were a resident of the District?

Mrs. GOODRICH. I was a resident of Washington.

Mr. BARCHFELD. Of the District of Columbia?

Mrs. GOODRICH. Yes, sir.

Mr. BARCHFELD. How long have you resided in the District?

Mrs. GOODRICH. I believe since the last time I have been back here it is about ten years.

Mr. HAY. Is Mrs. Brown here in town?

Mrs. GOODRICH. I couldn't tell you. I haven't saw her for over a year. I visited her, and I requested to see her and was permitted to see her by Doctor Clark, who is present, and asked in regard to her mental condition—if she was able to be taken out.

I wanted to see her a free woman if she was able to be taken out, and Doctor Clark told me that he had known Mary Brown—in fact I believe she has been under his treatment for five, or nearly five, years—and he seen no reason why she could not be discharged; that in that time he never saw anything out of her, but once she became angry at a colored servant who insulted her, and I was anxious that she have her liberty.

Mr. HAY. Well, was she discharged?

Mrs. GOODRICH. Yes; she was discharged, so her brother informed me. I haven't seen her since. Yes, I have. I met her once since.

The CHAIRMAN. Did you ever visit anybody else at the asylum there particularly?

Mrs. GOODRICH. I visited A. N. Willis. I visited Captain Berry—Capt. Mathew Berry.

The CHAIRMAN. Did you ever visit a person by the name of Donaldson?

Mrs. GOODRICH. I know of Donaldson.

The CHAIRMAN. Did you ever see him in the hospital?

Mrs. GOODRICH. I never saw him in the hospital, but I saw him in the grounds. I was then to visit A. N. Willis, who afterwards was discharged and is now an inmate of my home, and I came across a lady who was in distress. She knew I had been over there quite frequently, and she called me, not by my name, but "lady," and asked me to come there. I went there, and she pointed me to her son, by the name of Donaldson—Donalds or Donaldson—I guess that is it. I asked her what seemed to be the matter with him, and she said, "Look at his throat." I looked at his throat.

It was black from finger marks. Imprints of black spots was on his throat. I inquired how he got it, and the poor soul is, I believe, wrong mentally. He could hardly describe how he got it, except that he was choked. Just as I was turning down his collar and telling him to eat the apple that his mother had brought him carefully, so he wouldn't choke, along come Doctor Hummer. I knew this man was in Atkins Hall, for the mother had told me so, and told me her sad story. I called Doctor Hummer's attention to the young man, stating

that he said he was choked. Doctor Hummer very lightly huffed at it, but I says, "Doctor, look at him. It is a serious condition." He said, "Oh, my," or made some slight remark: "I guess some of the patients did it." But I says, "Where was the attendants when the patients was doing that, and where was you that you did not see that the attendants took care of the patients?" And he walked off and left me.

MR. BARCHFELD. Did you know Lewis J. Marshall before he was a patient at St. Elizabeth's?

MRS. GOODRICH. Yes, sir.

MR. BARCHFELD. How long had you known him?

MRS. GOODRICH. Lewis J. Marshall had been, from long prior to his arrest, May 22, in my house, aiding me in taking care of my foster father, who had lost his mind from an affliction in the cerebellum brain. I knew the hospitals were not the kind of place to put people in, and I endeavored to take care of him, and I was about to give out. I didn't know how I could stand it any longer, when Lewis J. Marshall volunteered his services and stayed in my house until he was arrested. He was working in my house at the time. We were working at the necktie business together, and when he was arrested his goods and my goods were all taken from us, and I never got them back. I was left in a destitute condition, with a sick father and a little girl raising. I had no goods to go on with. Our neckties were all taken.

MR. HAY. By whom?

MRS. GOODRICH. Commissioner Frank, I understand, was the man that ordered them to be taken.

MR. HAY. Who?

MRS. GOODRICH. Frank; since dead.

MR. BARCHFELD. Sanitary officer?

MRS. GOODRICH. Yes; sanitary officer.

MR. BARCHFELD. Was Lewis J. Marshall at your home the day he was arrested?

MRS. GOODRICH. He was.

MR. BARCHFELD. Was it at your home that he put on this striped suit?

MRS. GOODRICH. Yes, sir; in his own bedroom, in his own apartment.

MR. BARCHFELD. Did you see him before he started out with the striped suit?

MRS. GOODRICH. No, sir; not after he got the suit on.

MR. BARCHFELD. You saw him before he went away from your home with the striped suit on?

MRS. GOODRICH. Yes, sir; I saw him.

MR. BARCHFELD. Did you encourage him to wear that striped suit?

MRS. GOODRICH. Well, no; I discouraged him.

MR. BARCHFELD. What did you say to him?

MRS. GOODRICH. I told him I thought it would be bad for him to do so, but he felt the grievance that he had suffered under and that it would be a silent protest for this reason; and I had no control over Lewis J. Marshall.

MR. BARCHFELD. Who was he trying to serve at that particular time?

MRS. GOODRICH. Who was he trying to serve?

Mr. BARCHFELD. Yes.

Mrs. GOODRICH. To demonstrate the fact that he had been accused wrongfully and never given any chance for a legal trial.

Mr. BARCHFELD. What had he been accused of?

Mrs. GOODRICH. His property had been taken away from him.

Mr. BARCHFELD. Where?

Mrs. GOODRICH. At different places—in Maine and several other places, I don't just remember where—and he had never been given any trial, and he was anxiously seeking a trial, that if he was guilty he might be convicted of it and if he was innocent that he might be exonerated.

Mr. BARCHFELD. In other words, he was looking for trouble.

Mrs. GOODRICH. I believe he is a kind of man that looks after the interests of the poor.

Mr. BARCHFELD. He was looking for trouble and he found it. They arrested him.

Mr. SMYSER. Can you tell why, if his property had been taken from him wrongfully in Maine or elsewhere, he was protesting here in Washington and why he did not go to the place where his property had been wrongfully taken from him?

Mrs. GOODRICH. In giving you a statement on that I will have to give you his word, which, of course, is only second. I don't know whether you will take it or not. He told me that such had been the case, is all I knew.

Mr. HAY. What was he charged with? What crime was he charged with? You say he wanted a trial?

Mrs. GOODRICH. Post-office fraud, I believe; if I understood him right.

The CHAIRMAN. Do you mean sending improper matter through the mail?

Mrs. GOODRICH. Excuse me. I have a cold and don't hear quite clear. He had sent his goods out to ladies to manufacture them, so he told me; but, gentlemen, this is something of which I know nothing only by statements of other people, and I am here to testify to the truth about St. Elizabeth's.

Mr. HAY. You are only testifying now to what you heard?

Mrs. GOODRICH. Oh, I couldn't get through for a week. I don't believe you would want to be kept that long.

Mr. HAY. I just wanted to get at what he was charged with.

Mrs. GOODRICH. Post-office fraud, as near as I understand, and I understand it from him. He is willing to testify.

Mr. HAY. What did this sanitary officer have to do with these goods? I don't understand.

Mrs. GOODRICH. You will have to go to somebody else for that, for I can't tell you what he had to do with it, any more than he took them from my house and I never got my share back.

Mr. WALLACE. Was he connected with the asylum?

Mrs. GOODRICH. May I answer that in my opinion?

Mr. WALLACE. Yes.

Mrs. GOODRICH. I believe he aided in railroading them all over there. The law is that the Commissioners, I believe, send them, but he always sent them.

The CHAIRMAN. I think that is all, Mrs. Goodrich.

Mrs. GOODRICH. I know considerably more, whenever you are ready for it.

Mr. HAY. Do you know anything more about the asylum?

Mrs. GOODRICH. Yes, sir.

Mr. HAY. What do you know about the asylum?

Mr. SMYSER. These are things, of course, of which she has personal knowledge?

Mrs. GOODRICH. Yes, sir.

The CHAIRMAN. And that have happened since Doctor White was superintendent?

Mrs. GOODRICH. Yes, sir. I know of corresponding with A. N. Willis, and that his mail was taken up, though I registered it, and that my mail was taken away from persons given to post it, though it was my mail and I was not an inmate of that institution. I have the letters to show.

Mr. SMYSER. Was not that growing out of the postal difficulties of Mr. Marshall and your association with him?

Mrs. GOODRICH. How could it be?

Mr. SMYSER. I don't know. I am asking you, madam.

Mrs. GOODRICH. I couldn't tell you that. I don't think it was. If it was I didn't know anything of it.

Mr. SMYSER. There was some complaint about the use of the mails in this necktie business, was there not?

Mrs. GOODRICH. In Boston, Mass., but I was in Washington. It was not in Washington. It was in Boston, Mass., and in the East. We used no mail in Washington with our necktie manufacturing. We took them to the different stores and sold them, as I do my goods now that I manufacture.

Mr. HAY. Mrs. Goodrich, do I understand you to say that an inmate of the hospital mailed to you mail which you did not receive?

Mrs. GOODRICH. No, sir; I didn't receive it. I also did not receive letters that Mr. Marshall wrote to me until probably three or four weeks after they were written and dated, and the post-office showed that they had been stamped, and I received in one day five, I think.

Mr. HAY. Had they been opened?

Mrs. GOODRICH. If they had, they had been very cleverly sealed up.

The CHAIRMAN. Do you mean they were stamped with the same date as the letter by the post-office?

Mrs. GOODRICH. Yes, sir.

The CHAIRMAN. That was the fault of the post-office, was it not, then?

Mrs. GOODRICH. It was the post-office over there.

The CHAIRMAN. You mean that they were postmarked at St. Elizabeth's asylum?

Mrs. GOODRICH. Yes, sir. I received five in one day. I have the letters—not with me.

The CHAIRMAN. Have you them with you?

Mrs. GOODRICH. I haven't them with me. I also have the letters that I sent to A. N. Willis.

The CHAIRMAN. What do you mean, returned?

Mrs. GOODRICH. Mr. Willis is an inmate of my house and he handed me those letters. He valued them very highly because I acted in his defense, and they are in my possession now at home.

I registered those, and according to the post-office direction written upon them, "deliver to the addressee only," and yet they were taken from him before he read them, after he signed for them. They were taken from him and kept. One of them contained a photograph of my little foster daughter, whom I loved dearly, as an encouragement to the old man in his lonely place, and he did not receive that until just before he left. It was her little idea that if she pointed toward Heaven it would encourage Grandpa Willis to have courage, and she had her photograph taken pointing toward Heaven and sent it to him.

Mr. HAY. Mrs. Goodrich, do you mean to say this letter you sent was detained by the people at the asylum?

Mrs. GOODRICH. It was read before the old gentleman seen them. They were opened and read.

Mr. HAY. How do you know that? It is a pretty serious charge.

Mrs. GOODRICH. His statement.

Mr. HAY. His statement?

Mrs. GOODRICH. Yes, sir; his statement.

Mr. LEWIS J. MARSHALL. One letter sent by me at the present time is in the hands of the Government officials.

Mrs. GOODRICH. Yes; that I wrote to him, containing postage stamps. I forgot that.

Mr. MARSHALL. Never been delivered.

Mrs. GOODRICH. I supplied him with postage stamps so that he could write, and the letter was taken away. I don't know what made me do it. I admit that I did wrong. I sent it to come over with him to my house, and he delivered it to the hospital authorities, and they retained it. I sent it in charge of the young man, addressed to him—George Merchant.

The CHAIRMAN. I think that will do, Mrs. Goodrich.

TESTIMONY OF ANDREW KLUGG.

ANDREW KLUGG, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Mr. Klugg, where do you reside?

Mr. KLUGG. Washington, D. C.

The CHAIRMAN. Are you an attendant now at St. Elizabeth's?

Mr. KLUGG. Yes, sir.

The CHAIRMAN. How long have you been there?

Mr. KLUGG. I have been an attendant since 1889, May 22.

The CHAIRMAN. You have been there ever since?

Mr. KLUGG. I have been employed there since 1882, but I have only been an attendant since 1889, May 22.

The CHAIRMAN. What part of the hospital are you employed in now; what ward?

Mr. KLUGG. On the Richardson addition, on the east side of the road, under Doctor Logie.

The CHAIRMAN. What is your present salary; how much pay do you get?

Mr. KLUGG. \$35 dollars a month.

The CHAIRMAN. Do you know anything about cruel treatment to patients there? Have you ever seen it?

Mr. KLUGG. I have been in charge of a ward ever since 1889, and I never allowed it while I was there, and I don't believe it was carried on while I was away, during my absence.

The CHAIRMAN. Did you ever see a patient beaten there?

Mr. KLUGG. No, sir.

The CHAIRMAN. Did you ever see a patient struck?

Mr. KLUGG. No, sir; not in my ward.

The CHAIRMAN. Did you ever put strait-jackets on patients?

Mr. KLUGG. I have done it—that is, before Doctor White's administration there, while Doctor Foster and Doctor Godding was there. We had to use strait-jackets then, but not since Doctor White has been there.

The CHAIRMAN. You have not put any on since Doctor White has been there?

Mr. KLUGG. No, sir.

The CHAIRMAN. Did you ever use these cuffs?

Mr. KLUGG. No, sir.

The CHAIRMAN. What kind of patients are there in the particular ward where you are?

Mr. KLUGG. There are a lot of men there, up and around all the time. Sometimes they get a little excited, some few of them. The best of them are pretty straight. Sometimes they get scrapping between themselves.

The CHAIRMAN. How many attendants are there in your ward?

Mr. KLUGG. I have 62 patients. Sixty-one patients is charged up to me and another man, and then there is one man special.

The CHAIRMAN. Do you mean there is one patient that has one special attendant?

Mr. KLUGG. One special attendant. A patient by the name of Lieutenant Strong has a special attendant, and me and the other man has 61 men to look out for and the building to look out for.

The CHAIRMAN. Are you the only two men that have charge of 61 patients?

Mr. KLUGG. Yes, sir.

The CHAIRMAN. Does that mean night and day, and you have to arrange it between you?

Mr. KLUGG. We are on one evening until 5 and the next evening until 8, between the two of us. Then the night watchman comes on.

The CHAIRMAN. But during the day you two men have charge of 61 patients?

Mr. KLUGG. Yes, sir.

The CHAIRMAN. Are these men able to take care of themselves at all?

Mr. KLUGG. Yes; they take care of themselves.

The CHAIRMAN. Are you two men able, as attendants, to take proper care of that number of patients?

Mr. KLUGG. Sometimes we are and then again we ain't. It ain't been no later than three weeks ago that one of them cut me over the eye about ten minutes to 6. I was coming down the steps.

The CHAIRMAN. What did you do?

Mr. KLUGG. I couldn't do anything. The blood was running down my eye, and I had to holler for the other attendant to catch him.

The CHAIRMAN. Did the other attendant come up and get your patient?

Mr. KLUGG. That is all he done, taken hold of him and sat him down. That was all.

The CHAIRMAN. Had this patient been violent before?

Mr. KLUGG. No, sir; I never thought there was anything like that in him.

The CHAIRMAN. Has he been violent since?

Mr. KLUGG. No, sir.

The CHAIRMAN. Did you not put him in a strait-jacket, or anything of that kind?

Mr. KLUGG. No, sir.

The CHAIRMAN. Was he not hit or punished in any way by the other attendant?

Mr. KLUGG. No, sir; he just set him down in a chair. That was all. It was all over in about ten minutes.

Mr. SMYSER. Was that a surprise to you—that assault on you?

Mr. KLUGG. I considered him to be a good patient all along, and I was coming down the steps in front of him. He was behind me and he struck me in the eye, about ten minutes to 6 in the morning. He cut me right up over the eye here and I started to turn round, and my eye commenced bleeding and he picked up a slipper and struck me back of the head here. I couldn't get hold of him; I had to call for the other attendant.

Mr. HAY. Has there been any increase of your pay since you have been there; and if so, how much?

Mr. KLUGG. The last time I had an increase was under Doctor Godding's time.

Mr. HAY. How long ago?

Mr. KLUGG. I suppose it was about in 1895.

Mr. HAY. Has the number of attendants increased or decreased since Doctor White has been superintendent?

Mr. KLUGG. I used to have charge of an epileptic ward. I used to have 45 patients, and there were 4 attendants; but now I have 61 patients and only 2 attendants. The patients are not as bad as the epileptics. The epileptics was considered the worst class of patients over there at that time.

Mr. HAY. Have the attendants increased or decreased since Doctor White has been there?

Mr. KLUGG. I have got less now than I used to have.

Mr. HAY. Are any of the patients under you so disturbed that you can not control them?

Mr. KLUGG. Sometimes they get that way, just the same as I was telling you about this other man. I had no idea he was that kind of a patient.

Mr. HAY. What ward were you on?

Mr. KLUGG. I am in charge of the "I" building.

The CHAIRMAN. How about the food, Mr. Klugg?

Mr. KLUGG. The food at the present time is pretty good.

Mr. HAY. How has it been before the present time?

Mr. KLUGG. It was pretty bad there for a while, from about the 13th day of October, 1904, until the last day of December, 1905; but at the present time it is pretty good.

The CHAIRMAN. Did you make complaints about the food at this time, when you say it was bad?

Mr. KLUGG. I did, sir.

The CHAIRMAN. To whom did you make complaints?

Mr. KLUGG. To the supervisor and the doctor both?

The CHAIRMAN. How often does Doctor White visit that ward?

Mr. KLUGG. Doctor White has been over my ward, I suppose—we moved in there the 13th day of October. He was over there the 14th day, the next day, and he has been over there twice to my recollection since. I don't know whether he has been over while I was away or not.

The CHAIRMAN. Did you ever see the board of visitors there?

Mr. KLUGG. I haven't seen the board of visitors for three years.

Mr. SMYSER. What is this board of visitors we hear so much about?

Mr. KLUGG. I don't know. I suppose they are a board appointed by the President of the United States to go over there and inspect the institution once a month.

Mr. SMYSER. Do you get that knowledge from hearing about it or seeing such a board?

Mr. KLUGG. We only know the first Tuesday of every month is committee day—inspection day.

The CHAIRMAN. Do you make any particular arrangement for that day?

Mr. KLUGG. No, sir; I do not. I used to at one time. In Doctor Godding's time we used to go and hustle two or three days before. Monday and Tuesday we couldn't get out. We had to hustle and clean up and all like that. It is different now. It is the same old thing right along now. You can find one day just the same as the other.

The CHAIRMAN. You do not change their clothes when you know this board of visitors is coming, do you?

Mr. KLUGG. No, sir; in fine weather I send my men out for a walk. If it is bad weather, I keep them in.

Mr. HAY. You say the board of visitors has not been through your ward for three years?

Mr. KLUGG. No, sir.

Mr. HAY. It is not very necessary then to hustle and clean up if they don't go through there?

Mr. KLUGG. We have to do the same work there every day just the same.

The CHAIRMAN. Do you think two attendants, with the night watchman on at night, is sufficient for that ward?

Mr. KLUGG. We have no night watchman exactly for the one building. There is two buildings right connected close together. There is the I and M buildings, and he has to make rounds about every half hour, first from one building and then to the other.

The CHAIRMAN. You mean that sometime during the night this ward with 60 people is left without any attendants or watchmen?

Mr. KLUGG. There is one attendant sleeps there on the ward.

The CHAIRMAN. You or the man with you?

Mr. KLUGG. Or the man that works with me; yes, sir. I sleep over there too, but I don't sleep on the ward. I am there most any time I am called, though, but I don't sleep on the ward.

Mr. HAY. To what physician did you complain in regard to the food?

Mr. KLUGG. I complained to Doctor Logie. I complained to Mr. Clark, the supervisor.

Mr. HAY. Do you get the same food as the patients?

Mr. KLUGG. No; we get a little better.

Mr. HAY. You get a little better than the patients?

Mr. KLUGG. Yes, sir; but we didn't for awhile there, from the 13th day of October, 1904, until about the last day of December, 1905.

Mr. HAY. You did not get any better food than the patients?

Mr. KLUGG. No; we sometimes didn't get as good.

Mr. HAY. Now, the patients do not get as good food as you do?

Mr. KLUGG. The patients got better than we did then, but they get better now than they did then, because there is another party over there has charge of the cooking department. The party they had there seemed to me like she didn't take care. Sometimes she got there at 9 o'clock in the morning and left at half past 2 in the evening to go home.

Mr. HAY. Now, I understand the patients do get as good food as you do?

Mr. KLUGG. Yes, sir.

Mr. SMYSER. And it is better than it was some time ago?

Mr. KLUGG. Yes, sir.

Mr. SMYSER. Are you holding back anything?

Mr. KLUGG. Who, me?

Mr. SMYSER. Yes.

Mr. KLUGG. No, sir; I am not here to hold back anything. I will answer all questions as near as I can.

Mr. HAY. The class of patients you have under your control are not sick, in the sense of having to remain in bed. Do they walk about and get up every morning?

Mr. KLUGG. They get up every morning. We don't have to dress them or nothing.

Mr. HAY. They do that themselves?

Mr. KLUGG. Yes, sir.

Mr. HAY. They are able to take care of themselves in that respect?

Mr. KLUGG. Yes, sir. Sometimes two or three get scrapping among themselves, but we can't help that.

Mr. HAY. Do you know anything about the wards over there besides your own?

Mr. KLUGG. No, sir; I never visit other wards. It is against the rules, without you have business.

Mr. HAY. It is against the rules of the institution for an attendant on one ward to visit another ward?

Mr. KLUGG. Yes, sir; without they have business.

TESTIMONY OF E. A. JARRETT.

E. A. JARRETT, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Where do you reside, Mr. Jarrett?

Mr. JARRETT. At St. Elizabeth's Hospital.

The CHAIRMAN. Are you an attendant there?

Mr. JARRETT. I am a nurse.

The CHAIRMAN. How long have you been there?

Mr. JARRETT. I have been there since August, 1901—five years this coming August.

The CHAIRMAN. What are your duties there? What ward do you act in?

Mr. JARRETT. I have charge of the hospital ward, in the R building, hall 4. There is four hospital wards there and I have charge of one of them.

The CHAIRMAN. How many patients are there there?

Mr. JARRETT. What, in my ward?

The CHAIRMAN. Under your care, yes; in your ward?

Mr. JARRETT. Thirty-six.

The CHAIRMAN. How many other nurses are there?

Mr. JARRETT. There is three attendants, with myself. I am the only nurse on the ward now.

The CHAIRMAN. What are your duties? How do the duties of a nurse differ from those of an attendant?

Mr. JARRETT. Well, all of my patients are bedridden. I have six patients.

The CHAIRMAN. You have to attend to giving them their meals?

Mr. JARRETT. Yes, sir.

The CHAIRMAN. All of them?

Mr. JARRETT. All of them, with the assistance of my help.

The CHAIRMAN. That is, the attendants assist you in giving meals to the patients?

Mr. JARRETT. Yes, sir.

The CHAIRMAN. Do you take the temperature of these patients in case of necessity?

Mr. JARRETT. I do, when it is necessary.

The CHAIRMAN. Do you keep a regular sheet of reports as to the condition of the patient?

Mr. JARRETT. I do.

The CHAIRMAN. That you turn over to the doctor?

Mr. JARRETT. I turn that over to the doctors.

The CHAIRMAN. How often do the doctors come to that ward?

Mr. JARRETT. Doctor Logie comes there twice a day, and oftener if it is necessary, if I telephone for him.

The CHAIRMAN. And you make your reports to Doctor Logie and he examines all the patients?

Mr. JARRETT. Yes, sir.

The CHAIRMAN. That he does regularly twice a day, and he comes oftener if you send for him?

Mr. JARRETT. Yes, sir.

The CHAIRMAN. How are these patients sick? Are they old people, just sick from advancing age, or are they people with diseases of one kind or another?

Mr. JARRETT. It is both. Part of my patients are old, bedridden, and perfectly helpless, while part of them are acute cases. I have a mixture, but the most of them are old people—bedridden patients.

The CHAIRMAN. Most of them are old people?

Mr. JARRETT. Yes, sir.

The CHAIRMAN. Patients who will have to remain there always?

Mr. JARRETT. Practically, yes.

The CHAIRMAN. The acute cases come into the hospital wards, and when they are cured they are sent away.

Mr. JARRETT. They are sent away to another building. When they are able to be up and around and get exercise they are sent away to another building.

The CHAIRMAN. Did you ever see any cruelty in the ward where you are a nurse?

Mr. JARRETT. I never have.

The CHAIRMAN. Did you ever in that ward have to use anything in the nature of jackets or restraint?

Mr. JARRETT. No, sir; I never have.

The CHAIRMAN. You never have any violent people in the hospital wards, do you?

Mr. JARRETT. Occasionally we have an outburst of a patient, but it doesn't last long; but we never use restraint, strait-jackets, or nothing like that.

The CHAIRMAN. I do not suppose there is any necessity for it in your ward, is there?

Mr. JARRETT. Not now.

The CHAIRMAN. Do you ever have to tie any of the patients in bed?

Mr. JARRETT. No, sir.

The CHAIRMAN. You have never done that?

Mr. JARRETT. I never did that.

The CHAIRMAN. None of them have tried to get up at night and make disturbances?

Mr. JARRETT. The time of night?

The CHAIRMAN. I say, are there any patients who try to get up at night and make a disturbance?

Mr. JARRETT. Oh, yes, there is.

The CHAIRMAN. Don't you ever tie them?

Mr. JARRETT. We don't tie them. We report the case to the night doctor and he prescribes for them if it is necessary. We don't tie our patients.

The CHAIRMAN. How is the food that is given to these patients?

Mr. JARRETT. The food in the R building is good.

The CHAIRMAN. You give special food to these patients who are ill?

Mr. JARRETT. We do. In the hospital we give special food.

The CHAIRMAN. Are any of these patients who are in your ward able to go to the common dining room?

Mr. JARRETT. I have one or two patients that are able to go there, but they don't go. They don't care about going, and I humor them to that extent. I let them eat on the ward. They don't care about going to the dining room, and we humor our patients as much as possible, to that extent.

Mr. SMYSER. Why?

Mr. JARRETT. It seems like it is their only home, and we humor them that much. There is nobody else to please them.

The CHAIRMAN. You think you can get along with them better in that way?

Mr. JARRETT. Yes; if you humor them it helps considerable.

The CHAIRMAN. Are any of your patients able to go out at all?

Mr. JARRETT. I have two patients that go out.

The CHAIRMAN. Where do they go generally?

Mr. JARRETT. One of them goes out alone for a walk along about the building, and comes back. The other I send with an attendant, on pretty days, in the afternoon mostly.

The CHAIRMAN. But you never, since you have been a nurse in that ward, have had to tie patients in bed?

Mr. JARRETT. I never have.

The CHAIRMAN. And you have never seen it done?

Mr. JARRETT. I have never seen it done.

Mr. HAY. How long are you on duty?

Mr. JARRETT. I am supposed to be there at 6 o'clock in the morning, but I get there at 5.45 mostly, and am there at 5 o'clock in the evening, and every other evening until 8.

Mr. HAY. What is your pay?

Mr. JARRETT. I get \$40.

Mr. HAY. Are you a graduate nurse?

Mr. JARRETT. I am.

Mr. HAY. You get \$40 a month?

Mr. JARRETT. Yes, sir.

Mr. HAY. Has there been any increase in pay? Since when was there any increase?

Mr. JARRETT. I have had it increased \$2.50 a month. A year ago last October I came back to the hospital. I was away on a special case. When I came back I got an increase in salary of \$2.50 every six months until I reached the limit. The limit is \$40.

Mr. HAY. You say you were away on a special case?

Mr. JARRETT. Yes, sir.

Mr. HAY. Some case from the hospital?

Mr. JARRETT. From the city here.

Mr. HAY. You resigned during that time?

Mr. JARRETT. No; the hospital sent me out on a special case, but my salary and everything stops in the hospital at the time.

Mr. HAY. You were paid by somebody else?

Mr. JARRETT. Yes, sir.

Mr. HAY. Then the hospital authorities put somebody in your place?

Mr. JARRETT. They put somebody in my place until I came back.

Mr. HAY. Is that often done?

Mr. JARRETT. Not often. It hasn't been done now for a year or more, I think.

The CHAIRMAN. Mr. Jarrett, do you know anything about the case of George Brown?

Mr. JARRETT. George Brown; yes, sir.

The CHAIRMAN. Was Brown under your control?

Mr. JARRETT. He was once; yes, sir.

The CHAIRMAN. What happened to Brown?

Mr. HAY. Was he under your control at the time this accident happened?

Mr. JARRETT. No, sir.

Mr. HAY. Was he in your ward?

Mr. JARRETT. No, sir.

Mr. HAY. He was not in your ward?

Mr. JARRETT. He was on my ward at the time, but at the time of this accident I was night supervisor for the buildings, the Richardson group, at the time, for three months.

The CHAIRMAN. Did you know about this case? Did you know how he was injured, or anything about him?

Mr. JARRETT. Yes, sir; the night attendant on that ward reported to me immediately afterwards.

The CHAIRMAN. What was the report?

Mr. JARRETT. He reported to me that he was scalded in the toilet, and I reported it to the night doctor, and he prescribed for him.

The CHAIRMAN. Were the steam pipes connected with the toilet appliances in such a way that the steam could get in?

Mr. JARRETT. They are not; but it was an understanding of mine that there was some accident with the steam heater at the time through the hot water running into the cold water—the steam running through the two pipes.

The CHAIRMAN. Yes; it was an accident in connection with the steam pipes and the steam heat?

Mr. JARRETT. Yes, sir; it was out of repair at the time.

The CHAIRMAN. That was reported immediately, was it?

Mr. JARRETT. Yes, sir; I reported it as quick as I could get to the telephone.

The CHAIRMAN. Was the closet fixed so that that did not occur again?

Mr. JARRETT. Yes, sir; they reported it to the plumbers, and they came over immediately and had it fixed inside of forty-five minutes, I think. It happened at 8 o'clock, and the pipes was repaired before 9, I am pretty certain.

Mr. HAY. Mr. Jarrett, do you know anything about any other wards there except your own?

Mr. JARRETT. I don't know much of them. I don't have much time to go only to my own ward. I don't know anybody's business except my own. I know my own; that is about all.

Mr. HAY. You were supervisor, you say?

Mr. JARRETT. I was night supervisor at the time. I was on for three months.

Mr. HAY. You were supervisor for three months?

Mr. JARRETT. Night supervisor from 8 o'clock until 6 o'clock in the morning.

Mr. HAY. That carried you into other wards, did it?

Mr. JARRETT. Yes, sir; I was in care of the whole Richardson group—the four buildings across the road.

Mr. HAY. Did you see anything out of the way in those other wards?

Mr. JARRETT. I did not. Everything went along peacefully and in good shape the three months that I was on there. I had no occasion to make any report of anything, and if there was anything I would have reported it.

Mr. HAY. If you had seen anything out of the way, you would have reported it?

Mr. JARRETT. I undoubtedly would. That is what I am employed there for, principally; to do my work and report infractions of any rule.

Mr. SMYSER. Do you have any hesitancy in reporting anything you observe?

Mr. JARRETT. I do not; none at all.

The CHAIRMAN. I think that is all, Mr. Jarrett. Will you take the stand again, Mr. Klugg? Mr. Smyser wants to ask you a question or two.

ADDITIONAL TESTIMONY OF ANDREW KLUGG.

ANDREW KLUGG, who had been previously sworn, was examined, and testified as follows:

Mr. SMYSER. The question I want to ask you, Mr. Klugg, is this: For the last two years there, what, if anything, has been done by way of treatment, either of Doctor White or any physician, to these patients, looking to their improvement, if you know?

Mr. KLUGG. I will have to ask you to put that question over again. I didn't quite understand it.

Mr. SMYSER. You have told us that you have 61 patients there?

Mr. KLUGG. Yes, sir.

Mr. SMYSER. And you have described the character of the patients you have?

Mr. KLUGG. Yes, sir.

Mr. SMYSER. What I want to know, is what, if anything, has this institution done, either through Doctor White or any other physician there, by way of prescribing for these patients in your charge, to improve their condition.

Mr. KLUGG. I don't know that there has been any. I have only had this class of patients since about 1904.

Mr. HAY. Are they patients who could be improved? Is their disease chronic so that there is no hope for them to get well?

Mr. KLUGG. The majority of them there; yes.

Mr. SMYSER. Take those who are not included in the majority. Do you mean to say there has been nothing done by these physicians out there by way of treatment to relieve that condition of mind?

Mr. KLUGG. They have been treated and they have been discharged since I have had charge of this class of patients.

Mr. SMYSER. Do you bathe the patients?

Mr. KLUGG. Yes, sir.

Mr. SMYSER. What sort of bath have you?

Mr. KLUGG. A shower bath.

Mr. SMYSER. You do not have the tub bath?

Mr. KLUGG. No, sir; not now. We used to have it.

Mr. SMYSER. So you can not use the same water to bathe two patients in?

Mr. KLUGG. No, sir; I wouldn't allow it if I had a tub there.

Mr. SMYSER. You would not?

Mr. KLUGG. No, sir.

Mr. SMYSER. Would that hurt a patient?

Mr. KLUGG. Two men in one tub of water?

Mr. SMYSER. Yes.

Mr. KLUGG. Do you think it would be right?

Mr. SMYSER. I am asking you.

Mr. KLUGG. I don't think it would be right.

Mr. SMYSER. Well, I agree with you.

Mr. BARCHFELD. Did you ever know that to occur while you were at the institution?

Mr. KLUGG. No, sir. I have had charge of a ward ever since 1889, the 22d day of May, and I wouldn't allow it. I never would allow it.

Mr. BARCHFELD. Did you ever hear of it being done?

Mr. KLUGG. I have heard so, but you can't go by hearsay.

Mr. BARCHFELD. No; that is right.

ADDITIONAL TESTIMONY OF E. A. JARRETT.

E. A. JARRETT, who had been previously sworn, was examined, and testified as follows:

Mr. HAY. Mr. Jarrett, how often does the superintendent go through your ward?

Mr. JARRETT. How often?

Mr. HAY. Yes.

Mr. JARRETT. Well, he has been there four times since the 11th of January that I know of, while I was there; but remember, I am not there all the time.

Mr. SMYSER. Was he ever there long enough to look at a patient and talk to him and learn his condition and whether any treatment ought to be prescribed by him?

Mr. JARRETT. I think so, yes; I remember an incident distinctly.

Mr. SMYSER. It is a pretty long time between visits out there, is it not?

Mr. HAY. You say you recall an incident. What was it?

Mr. JARRETT. It was an incident of a patient by the name of Tom Smith. He came through the ward one Sunday afternoon with Secretary Hitchcock and went around over the ward with the Secretary, and this patient wanted to speak to him, and he left the Secretary there some time and went back and sat on the edge of the bed with the patient, and sat there and talked to him.

Mr. SMYSER. Who was with the Secretary?

Mr. JARRETT. Doctor White. He asked me an incident when Doctor White talked to a patient.

Mr. HAY. How often do the board of visitors come through the ward?

Mr. JARRETT. I have never saw them since I have been there.

Mr. HAY. You have never seen them?

Mr. JARRETT. No, sir.

Mr. HAY. You have been there five years and have never seen the board of visitors?

Mr. JARRETT. Since we have been across the road in the Richardson group—the new buildings—I have never saw the board of visitors over there, but I have saw the board of visitors in the five years.

Mr. HAY. What I meant was in the ward.

Mr. JARRETT. Not across there; since I have been across the road I haven't saw them.

Mr. HAY. How long have you been across the road?

Mr. JARRETT. Since a year ago last October.

Mr. HAY. About eighteen months?

Mr. JARRETT. Yes; further than that, I can't remember distinctly enough to remember.

Mr. HAY. Do you know who compose the board of visitors?

Mr. JARRETT. No, sir; I do not. I couldn't name the board of visitors to save my life. I don't know who they are or nothing about them, only hearsay. I know some of them, but I couldn't name all of them.

The CHAIRMAN. I have here a letter from the Acting Attorney-General, with inclosures, in relation to the selection of Mr. McNamara to appear at the hearings of the committee, which will be made a part of the record.

The papers referred to are as follows:

DEPARTMENT OF JUSTICE,

Washington, May 11, 1906.

The CHAIRMAN OF THE COMMITTEE TO INVESTIGATE THE MANAGEMENT OF THE ST. ELIZABETH GOVERNMENT HOSPITAL FOR THE INSANE, *House of Representatives.*

SIR: The morning's press reports indicate that the assignment of an assistant district attorney in connection with your investigation of the Government Hospital for the Insane has occasioned some misunderstanding as to the attitude of this Department in respect to such investigation.

The inclosed copy of correspondence in relation to the matter will, I think, show that it has not been the purpose of this Department to interfere with this investigation in any way.

I regret that any misapprehension should have existed as to the attitude of this Department.

Respectfully,
(Inclosure 11460.)

M. D. PURDY, *Acting Attorney-General.*

DEPARTMENT OF THE INTERIOR,

Washington, April 24, 1906.

The honorable the ATTORNEY-GENERAL.

SIR: I transmit herewith copy of a letter from the Superintendent of the Government Hospital for the Insane, and have to commend to your favorable consideration the request therein contained that counsel be furnished the Board of Visitors of the Government Hospital for the Insane to render them such assistance as may be necessary in connection with the proposed investigation of the affairs of that institution.

As this investigation is shortly to begin, I will be glad if you will give this matter your early consideration.

Very respectfully,

E. A. HITCHCOCK, *Secretary.*

DEPARTMENT OF JUSTICE, *April 25, 1906.*

The honorable the SECRETARY OF THE INTERIOR.

SIR: I have your letter of April 24 transmitting a copy of a communication from the Superintendent of the Government Hospital for the Insane and requesting that I consider the propriety of assigning an attorney to represent the board of visitors in an investigation about to be held under the direction of Congress.

I incline to the opinion that it would not be best for me to assign counsel as suggested by you. The purpose of Congress is to ascertain the facts, and to that end all possible aid should be afforded.

You have in the office of the Assistant Attorney-General several lawyers, and I suggest that you may require any one of them to counsel with the board of visitors with a view of aiding it and bringing to the attention of the committee appointed by Congress all relevant matters.

Respectfully,

C. H. ROBB,
Acting Attorney-General.

DEPARTMENT OF JUSTICE,

Washington, April 30, 1906.

DANIEL F. BAKER, Esq.,

United States Attorney, Washington, D. C.

SIR: The Secretary of the Interior has transmitted to this Department a copy of a communication from the Superintendent of the Government Hospital for the Insane requesting that I consider the propriety of assigning an attorney to represent the board of visitors in an investigation about to be held under the direction of Congress.

The Secretary has stated verbally that owing to press of business it is inconvenient for him to assign anyone for this purpose from the office of the Assistant

Attorney-General for his Department, and he therefore suggests that you assign some one connected with your office to counsel with the board of visitors with a view of aiding it in bringing to the attention of the committee appointed by Congress all relevant matters.

Respectfully,

M. D. PURDY,
Acting Attorney-General.

DEPARTMENT OF JUSTICE,
Washington, April 30, 1906.

The honorable the SECRETARY OF THE INTERIOR.

SIR: Again adverting to your letter of April 24, 1906, wherein you requested me to consider the propriety of assigning an attorney to represent the board of visitors of the Government Hospital for the Insane in an investigation about to be held under the direction of Congress and your verbal statement of this morning, in reply to my suggestion to you under date of April 25, that owing to press of business it is inconvenient for you to assign anyone connected with the office of Assistant Attorney-General for your Department, I have the honor to advise you that the United States attorney for the District of Columbia will assign an attorney from his office to counsel with the board of visitors in connection with the proposed investigation.

Respectfully,

M. D. PURDY,
Acting Attorney-General.

The committee, at 3.25 p. m., went into executive session, and at 3.45 p. m. adjourned until Wednesday, May 16, 1906, at 10 o'clock a. m.

HOUSE OF REPRESENTATIVES,
Washington, D. C., May 16, 1906—10 o'clock a. m.

The committee met pursuant to adjournment.

Present: Messrs. Olcott (chairman), Smyser, Barchfeld, Hay, and Wallace; also Dr. William A. White, Stuart McNamara, Richard P. Evans, and others.

TESTIMONY OF DR. L. H. TAYLOR.

L. H. TAYLOR, being first duly sworn, was examined and testified as follows:

The CHAIRMAN. Do you reside in the city of Washington?

Mr. TAYLOR. Yes, sir.

The CHAIRMAN. How long have you been a practicing physician?

Mr. TAYLOR. Since 1903.

The CHAIRMAN. Were you ever connected with St. Elizabeth's Hospital?

Mr. TAYLOR. Yes, sir.

The CHAIRMAN. In what capacity?

Mr. TAYLOR. As medical officer; as medical interne.

The CHAIRMAN. When did you go there?

Mr. TAYLOR. I was there from October, 1903, until July 1, 1904.

The CHAIRMAN. Were you appointed by Doctor White?

Mr. TAYLOR. I was appointed as the result of a competitive examination. I think I was appointed by the Secretary of the Interior.

The CHAIRMAN. Is that the way the medical staff of the hospital is appointed?

Mr. TAYLOR. I think so, at present.

The CHAIRMAN. Who conducted the examination?

Mr. TAYLOR. The Civil Service Commission,

The CHAIRMAN. In the civil service offices here in the city of Washington?

Mr. TAYLOR. Yes, sir; the examination is advertised throughout the United States and is held at different stations. I took the examination here in Washington.

The CHAIRMAN. Who were the examiners?

Mr. TAYLOR. I do not know the names of them.

The CHAIRMAN. You say you were there from October, 1903, until what date?

Mr. TAYLOR. Until July 1, 1904.

The CHAIRMAN. What were your specific duties?

Mr. TAYLOR. I was assistant to one of the assistant physicians in Howard Hall department of the hospital. The hospital is divided into departments, each department being under an assistant physician.

The CHAIRMAN. Who was the assistant physician in Howard Hall department?

Mr. TAYLOR. Doctor Toner.

The CHAIRMAN. You were an assistant to him?

Mr. TAYLOR. Yes, sir.

The CHAIRMAN. Were you the only physicians who were connected with that particular branch?

Mr. TAYLOR. Yes, sir.

The CHAIRMAN. How many patients were there in the particular department with which you were connected?

Mr. TAYLOR. The number varied from day to day. I should say there were from 450 to 475 patients.

The CHAIRMAN. How many wards were there in that department?

Mr. TAYLOR. There were thirteen.

The CHAIRMAN. Do you know how many attendants altogether there were in that department?

Mr. TAYLOR. I should say there were probably fifty.

The CHAIRMAN. In your opinion, was there a sufficient number of attendants to properly care for the patients?

Mr. TAYLOR. Yes, sir; I consider that there was.

The CHAIRMAN. How often did you visit the entire department that was under your care with Doctor Toner?

Mr. TAYLOR. Twice a day.

The CHAIRMAN. You went through the entire department and saw all of the 450 patients, or as many patients as there were there, twice every day?

Mr. TAYLOR. Yes, sir. Understand me, Mr. Chairman, that on some occasions when I would go through the wards the patients would be out in the grounds walking. In the morning, on my early round with Doctor Toner, the patients were always in the buildings. Later in the day some of the patients, who were practically well, except for their mental state, were out walking.

The CHAIRMAN. You and Doctor Toner would go around in the morning?

Mr. TAYLOR. We went around together in the morning and I always made my rounds on my own responsibility in the afternoon.

The CHAIRMAN. At that time some of the patients were out?

Mr. TAYLOR. Yes, sir.

The CHAIRMAN. You went around in the morning before the patients had gone out, so that you and Doctor Toner made one circuit of your department every day?

Mr. TAYLOR. Yes, sir; and in addition to that I expect I visited the hospital wards of my department three or four, and perhaps half a dozen times a day?

The CHAIRMAN. How many people did the hospital ward accommodate?

Mr. TAYLOR. We had one building known as the annex which accommodated bedridden patients. The first floor accommodated, I would say about 80 patients, who were always there and always in bed. I suppose I visited that ward two or three or half a dozen times of day. The Howard Hall building, which was the criminal building and hospital ward, was not so extensive. We had a few tuberculous negroes there. We always had probably ten or a dozen who were in the hospital ward from an acute attack of excitement and who had probably hurt themselves.

The CHAIRMAN. Did you visit those wards?

Mr. TAYLOR. Just as often as I did the annex.

The CHAIRMAN. How constantly were you on duty; practically twenty-four hours a day?

Mr. TAYLOR. No, sir; the tour of duty there, for the assistant physicians and other physicians, is from 7 o'clock in the morning until 9 o'clock at night, when the night officer takes charge of the institution.

The CHAIRMAN. Did you sleep in the grounds?

Mr. TAYLOR. Yes, sir.

The CHAIRMAN. What do you know about the food that was furnished there? Did you ever examine the food?

Mr. TAYLOR. I made it my business to examine the food repeatedly, and at times when they did not expect me to examine it. I made it my business to go around at meal times and examine it.

The CHAIRMAN. What is your opinion about it?

Mr. TAYLOR. My opinion is that it was vastly above what ordinary institution food is. It is a hard job to furnish food for so large a mass of people. Taking it all in all, I think they got excellent food. They got an abundance of it, and it was nutritious food.

The CHAIRMAN. How was it cooked and served?

Mr. TAYLOR. It was cooked as well as any large mass of food could be cooked. That is a tremendous institution, and the food had to be served from a central station to the different departments, and of necessity it must be chilled in transit.

The CHAIRMAN. How many kitchens are there in the whole asylum?

Mr. TAYLOR. The asylum has been much modernized since my time by the addition of the new buildings. When I was there, there was a main kitchen, known as the principal kitchen, which furnished practically three quarters of the institution. Then there was another kitchen in the place they called the bull pen. I think they were the distributing points when I was there.

The CHAIRMAN. Where did the food that was served to your patients come from?

Mr. TAYLOR. It came from the main kitchen.

The CHAIRMAN. How often did the patients there have meat?

Mr. TAYLOR. I would not like to say, but I have hardly ever been to a midday meal when there was not meat served. It is my impression that meat was served to them practically every day. The supper was light. It would consist of fruit of some kind, bread and butter, and tea or coffee.

The CHAIRMAN. What did they have for breakfast?

Mr. TAYLOR. For breakfast they had some kind of cereal and I think probably eggs or something like that.

The CHAIRMAN. Did they usually have eggs?

Mr. TAYLOR. I think eggs were served a certain number of days in the week to all patients. The sick diet patients had eggs at all meals, whenever they were ordered by the doctor. They had milk, and so forth—a lighter diet.

The CHAIRMAN. I suppose there was a material difference between the food given to a regular patient and those in the hospital wards?

Mr. TAYLOR. There was a difference, in that the food was coarser which was served to convalescent patients. They had bread and butter and meat that was roasted, lamb and beef, or something of that kind. Chickens, eggs, and milk were served to the hospital patients, and custards of various kinds.

The CHAIRMAN. How about the cleanliness of the food?

Mr. TAYLOR. I never saw anything at all to criticise. I say that after having partaken of it myself on a number of occasions to try it.

The CHAIRMAN. Was it a part of your duty to go into the kitchen?

Mr. TAYLOR. I considered it a part of my duty. I do not know whether it was part of the routine or not, but my duty was to look out for the patients in every possible way, and I considered that an important item.

The CHAIRMAN. And you did go?

Mr. TAYLOR. I did. I was instrumental on one occasion in having an attendant discharged for stealing sick diets.

The CHAIRMAN. Let me ask you this question: Were there many violent patients under your care?

Mr. TAYLOR. Yes, sir; a great many of them.

The CHAIRMAN. How did you control the violent patients?

Mr. TAYLOR. We controlled the violent patients by either chemical or mechanical restraints.

The CHAIRMAN. What do you mean by chemical restraints?

Mr. TAYLOR. I mean by drugs.

Mr. SMYSER. By opiates?

Mr. TAYLOR. By bromides. We do not use opium if we can avoid it, and we do not use chemical restraint if we can avoid it. We prefer mechanical restraints.

The CHAIRMAN. What was the physical restraint?

Mr. TAYLOR. Bed saddles, camisoles, and straps.

The CHAIRMAN. Will you describe a bed saddle?

Mr. TAYLOR. Personally I regard the bed saddle as one of the best means of restraint; but I differ from the superintendent on that point. The patient is put in bed. His hands are strapped, his ankles are strapped, and there is a strap passed over his waist, so that there is a certain amount of freedom. These wristlets have cotton lining or something in them to prevent excoriation of the skin. I consider it to be an application of mechanical restraint where it is needed and nowhere else—the difference between a yacht and a canal boat.

Mr. SMYSER. How often was it necessary to put that on patients?

Mr. TAYLOR. I was interested in the patients when Doctor White stopped so much restraint. He was instrumental in stopping restraint in St. Elizabeth's. I took notes about this matter, and in our department of 450 to 470 violently insane, because we had the worst class of patients there, we averaged only two people in twenty-four hours, and one of those two was a negro who begged us to keep restraint on him because he was afraid he would kill somebody if it was taken off.

Mr. SMYSER. Is he the man who came from Fort Leavenworth?

Mr. TAYLOR. He is a colored man in Howard Hall.

Mr. SMYSER. There is one man who came from Fort Leavenworth whom we saw there.

Mr. TAYLOR. I don't know whether he is the man or not.

This was a man who begged me with tears in his eyes not to take the restraint off of him, because he knew he would kill somebody if it was taken off. It was taken off twice in twenty-four hours.

Mr. SMYSER. Did he have a homicidal mania?

Mr. TAYLOR. I am rather inclined to think he did.

Mr. SMYSER. Who was the other one you spoke of?

Mr. TAYLOR. I say that they averaged two a day.

Mr. SMYSER. What about this camisole, or strait-jacket, as it is called?

Mr. TAYLOR. A camisole is a long gown into which a man is put. It has long sleeves, and his fingers do not come through the sleeves, so that the sleeves can be tied around behind him and he can move his hands around without getting them to his head.

Mr. SMYSER. When a camisole is put on he has some use of his hands?

Mr. TAYLOR. He has lots of motion, sir; sometimes so much that he succeeds in getting out if he is not watched.

Mr. SMYSER. Can there be any physical hurt to that man if they are properly put on?

Mr. TAYLOR. No, indeed, sir.

Mr. SMYSER. Do you remember any case where a thing of that kind did happen by reason of their being tied so tight that it stopped the circulation?

Mr. TAYLOR. It is not possible. It is not tied tight around him at all. His hands are sliding backward and forward in loose sleeves all the time.

Mr. SMYSER. For how long a time do you keep these things on the patients?

Mr. TAYLOR. It would depend entirely upon the class of patients. I suppose it would average three or four hours.

Mr. SMYSER. Did you ever see one put on a patient and kept on for twenty-four hours?

Mr. TAYLOR. No, sir.

Mr. SMYSER. Of course those things had to be taken off when they went to their meals?

Mr. TAYLOR. Those patients who were so violently maniacal required to be fed. They would not eat anything. They will starve themselves to death.

Mr. SMYSER. How are they fed?

Mr. TAYLOR. A patient of that kind is fed with a nasal tube or a stomach tube.

Mr. SMYSER. How is that feeding tube used?

Mr. TAYLOR. The patients would starve themselves to death, and I considered it my duty to feed them at least twice in twenty-four hours.

Mr. SMYSER. Is that a difficult operation?

Mr. TAYLOR. It is not at all difficult; but it is a disagreeable operation to have a man throw up on you and try to bite you when you are trying to do something for him.

Mr. SMYSER. Describe that operation.

Mr. TAYLOR. A nasal tube is a soft rubber tube from 24 to 30 inches in length, and, as a rule, it has a rubber funnel at the end. You can put a glass funnel in if you prefer it.

You can either pass it by way of the mouth or by way of the nose; but I invariably pass it by the nose, because I think it is the most humane way to do it. Passing it by the mouth means a struggle with the patient, and you are liable to break his teeth in prying his mouth open, and the attendant and doctor are liable to be bitten. Then there is a great deal more nausea in feeding through the mouth than in feeding through the nose. Through the nose there is practically no pain and he can not bite you, and you can not break his teeth. The patient is put into bed. Those people who are very much reduced will lie there and you can pass the tube and he will not resist any; but if you have a maniacal patient it requires two assistants.

Mr. SMYSER. Do you strap them in bed?

Mr. TAYLOR. No, indeed, sir. We hold their hands and feet.

Mr. SMYSER. Is that feeding tube ever used without the doctor being present?

Mr. TAYLOR. It never was in my department. I don't know about anybody else; but I should not think it would be.

Mr. SMYSER. How many men, on an average, do you have to feed in that way?

Mr. TAYLOR. I had one man that I fed over there for a month before he finally died. I kept him alive by feeding him twice a day. I had one man there who said he had no stomach, and it was no use taking anything into it. I kept him alive there for months by feeding him through the nose.

It was not a very pleasant job for me; but I thought I was doing what was right to feed him through the nose. I did not get any dilation of the nose or any sores in the nose. I used first one side of the nose and then the other, and I never had any trouble with his nose.

Mr. SMYSER. Did you ever hear of a feeding tube being used unnecessarily?

Mr. TAYLOR. No, sir; it is a disagreeable job, and I don't think anybody would use that if they could help it.

Mr. SMYSER. You never heard of that being done as a punishment?

Mr. TAYLOR. No, sir. Mr. Chairman, an attendant has no right to do anything like that over there. It is the doctor's business to do that.

Mr. SMYSER. It is rather a delicate thing to do, is it not?

Mr. TAYLOR. No, sir; it is not especially delicate. There are some few points you have to look out for. For instance, in withdrawing

the tube it is necessary to press it when it comes from the throat, so that no fluid will run back into the lungs.

Mr. SMYSER. How far does the end of the tube go down into a man's body?

Mr. TAYLOR. It is 18 inches from the tip of the teeth.

Mr. SMYSER. Can you feed him with a short tube, 5 or 6 inches long?

Mr. TAYLOR. He would vomit it right out, sir.

The CHAIRMAN. It has been testified here that these feeding tubes were perhaps 6 inches long and made of glass. Did you ever see anything of that kind?

Mr. TAYLOR. I never saw or never heard of anything of that kind.

Mr. SMYSER. Could it be done with such an apparatus?

Mr. TAYLOR. I don't see how it could be. The nasal aperture is curved, and we would have to have a pretty sharp curve down at the back.

Mr. SMYSER. That is the reason you use rubber?

Mr. TAYLOR. Yes, sir.

The CHAIRMAN. How far does it go down?

Mr. TAYLOR. It goes down into the stomach about 18 inches.

The CHAIRMAN. It goes right into the stomach?

Mr. TAYLOR. Yes, sir; there is a mark on the tube showing the distance. Almost every tube furnished by the druggists or manufacturers has a mark on it indicating how far to introduce it.

Mr. SMYSER. Were those marks on those you used?

Mr. TAYLOR. I never saw one that did not have it.

Mr. SMYSER. Did you ever see any of these glass feeding tubes?

Mr. TAYLOR. I never heard of them, and I don't think there are any in existence.

The CHAIRMAN. Do you put this tube down as far as you do a stomach pump?

Mr. TAYLOR. Yes, sir; they are just converse operations. For instance, I never feed a man in that way that I do not first wash his stomach out and get the stomach in good condition. I do that by running salt water into the stomach, and then you just lower the tube and run it out. I have not only done that at St. Elizabeth's, but I repeatedly do it in general hospital practice.

The CHAIRMAN. Are you in general hospital practice now?

Mr. TAYLOR. Yes, sir; at George Washington University Hospital.

The CHAIRMAN. Have you ever been in any other institution?

Mr. TAYLOR. I have only been in those two. I resigned from St. Elizabeth's.

The CHAIRMAN. Are you interne there?

Mr. TAYLOR. No; I am resident physician. I have charge of the medical and surgical work there.

The CHAIRMAN. Were there ever any complaints made to you of ill treatment of patients?

Mr. TAYLOR. The patients occasionally complained to me of being struck by the attendants.

The CHAIRMAN. Did you investigate those cases?

Mr. TAYLOR. Always; just as quick as I could get there. I was never instrumental in having an attendant dismissed. I could never

prove anything of that kind. I had two attendants dismissed while I was there—one for drunkenness and one for stealing sick diets.

The CHAIRMAN. What were their names?

Mr. TAYLOR. I think the one who was discharged for misappropriating sick diet was named Smith, but I am not certain about that. It can be very easily gotten from the records there.

The CHAIRMAN. What was the name of the man who was discharged for drunkenness?

Mr. TAYLOR. The man's name was Goff. I caught him in the ward drunk.

The CHAIRMAN. Did you ever see any ill treatment of patients?

Mr. TAYLOR. I never did.

The CHAIRMAN. Did you ever see an attendant strike a patient?

Mr. TAYLOR. Never; if I had seen an attendant strike a patient he would not have been there any length of time. It would have only been necessary for me to have given that testimony and he would be discharged.

The CHAIRMAN. Did you ever see an attendant choke a patient by putting his knee in the small of his back and making a crook around his neck?

Mr. TAYLOR. No, sir; I never have.

The CHAIRMAN. You were in daily and constant contact with the patients?

Mr. TAYLOR. Yes, sir; it was my habit, as it was the habit of the rest of the physicians there, not only to make these regular rounds but to make rounds at irregular hours. I do not believe much in formal rounds, when people are prepared for you.

The CHAIRMAN. How often did Doctor White come into the ward?

Mr. TAYLOR. When I was there Doctor White went over our hospital wards once a week—during the nine months I was there. I know positively that he did not miss two Sundays in the nine months I was there; that included an inspection of three-fourths of our department.

The CHAIRMAN. How long did it take you to make those rounds?

Mr. TAYLOR. I think we leave the center to go the rounds about half past 9 and we usually got back to center about 12 o'clock.

The CHAIRMAN. In going through the wards did you, at times, talk to the patients?

Mr. TAYLOR. The patients were always supposed to do their talking at that time. That was the time that they had to talk with the physicians, and if they had complaints to make that was the time. They were brought down there for that purpose.

The CHAIRMAN. Was there ever any difficulty about the patients talking to you and to the other doctors?

Mr. TAYLOR. I can not see why there should have been any difficulty. They saw me two or three times a day.

The CHAIRMAN. The patients always did talk to you?

Mr. TAYLOR. Oh, my goodness, yes; there was a perfect inundation of requests and complaints of this thing and that thing. That was my business. It took me two or three hours every morning to go around, on the first round, and listen to them.

The CHAIRMAN. Did you investigate their complaints?

Mr. TAYLOR. Always. A great many accidents happen in insane asylums, and I think that quite a large majority of them are inflicted

by the patients upon each other in outbursts of excitement or anger. I have never been able to find a patient who has been abused by an attendant, but I have treated a large number of attendants who have been most unmercifully abused by the patients.

The CHAIRMAN. Did it often happen that the patients got to fighting among themselves?

Mr. TAYLOR. Certain classes of them do. Epileptics are especially prone to do that. They are especially irritable and suspicious, and without warning, rhyme, or reason they will assault anything in the neighborhood.

The CHAIRMAN. Were those rows between patients of frequent or daily occurrence?

Mr. TAYLOR. They were not of frequent occurrence when you think of the number of patients there. I suppose we would have a row about once a week, and we had 450 men there. It is right hard to get 450 insane men together without having a fuss once a week.

Mr. SMYSER. You are not alluding to the House of Representatives, are you?

Mr. TAYLOR. No, sir.

Mr. SMYSER. How old are you?

Mr. TAYLOR. I am 30 years old.

Mr. SMYSER. Where did you graduate?

Mr. TAYLOR. I graduated at George Washington University, medical department, in this city. It was the Columbian College at the time. The name has since been changed.

Mr. SMYSER. You are now at what hospital?

Mr. TAYLOR. I am at the George Washington University Hospital.

Mr. SMYSER. From your description of this feeding tube I am curious to know how in the world people could get the idea that a glass tube 4 or 5 or 6 inches long was used for that purpose. Can you account for that?

Mr. TAYLOR. No, sir; I could not, by any possible line of reasoning in my head, account for it.

Mr. SMYSER. From your knowledge and experience was such a thing possible?

Mr. TAYLOR. I do not think it was possible. I do not think it is physically possible to pass a glass tube through the mouth, down through the œsophagus, and into the stomach. Certainly nobody would ever try it upon me, because I would feel morally certain it would break and there would be something doing down there from the sharp glass.

Mr. SMYSER. Did you ever see any such instrument about that institution or hear of such a one?

Mr. TAYLOR. Never in my life.

Mr. SMYSER. I understand you to say that Doctor White has dispensed with all restraint, as far as possible?

Mr. TAYLOR. Yes, sir.

Mr. SMYSER. In your judgment is that wise or unwise?

Mr. TAYLOR. I think, in view of what has happened, that it is extremely wise, but I am free to confess that when it commenced I was very nervous. I had a whole lot of people around there gunning for me, insane people, and it was a pretty nervous process to walk by a man like that, who was sitting down in a chair, and having to watch him all the time for fear he would knock your brains out.

Mr. SMYSER. Is that the tendency of modern treatment of patients?

Mr. TAYLOR. Yes, sir; absolutely.

Mr. SMYSER. What do you say as to St. Elizabeth's hospital keeping pace with the tendency of modern treatment for that class of patients?

Mr. TAYLOR. I should rather say that they are a little in advance of it. I think they are moving pretty rapidly in that line, and that they have gotten restraints down to a minimum.

Mr. SMYSER. When did Doctor White issue the order eliminating it?

Mr. TAYLOR. I can not give you the exact date, but I think it was within a month after he came there or within a month after I came there. I came about two weeks after he did. It was one of the first of the general orders that he issued applying to all departments.

Mr. SMYSER. There are demented for whom restraint is absolutely essential, not only for the welfare of the patients but for all the welfare of the other patients and the attendants?

Mr. TAYLOR. Yes, sir; and I will go a step further and say that mechanical restraint is necessary. I think that mechanical restraint is a long ways ahead of restraint by attendants.

Mr. SMYSER. I suppose you have noticed in the morning Post that the court is about to gag a fellow that is on trial in order to restrain him?

Mr. TAYLOR. No, sir.

Mr. SMYSER. Is that just such a situation as you sometimes meet with in the hospital, where it is absolutely necessary to mechanically restrain a patient?

Mr. TAYLOR. Yes, sir. I would like to tell you, Judge Smyser, why I consider mechanical restraint preferable.

Mr. SMYSER. I would like to know.

Mr. TAYLOR. If you have a violently insane person who is struggling, and you have two or three people holding that man, it excites him. He has the idea that he is fighting somebody, and he is going to fight all the harder. In addition to that, it is not human nature for people to fight with somebody and not lose their temper and do something they ought not to do. If you put mechanical restraint on sufficient to restrain him, there is the end of it.

Mr. SMYSER. What you mean is that even sane men, in contending with insane men, unconsciously let their temper get the best of them?

Mr. TAYLOR. Yes, sir; I do absolutely. I do not believe the man is born yet that would not lose his temper eventually.

Mr. SMYSER. Not since St. Paul's time?

Mr. TAYLOR. Well, he is not living now.

Mr. SMYSER. What do you say as to the proper classification of patients over there; could that be improved?

Mr. TAYLOR. It was being very rapidly improved when I left. I have been over to the institution very frequently since I left, and it has been gotten down just about as fine as it can be gotten. We have the epileptics segregated, and the colored segregated from the white, and the criminal insane segregated from those who are not criminal, so far as it is possible with the buildings we have over there. A lot of these complaints about men suddenly becoming violent and not being properly classified is unavoidable and can not be helped. You take a man suffering from senile dementia and nobody can tell

when that man will become violently insane. He will, during the majority of the time, be a harmless, doddering old man; but without warning he will become excited and violent and remain so for two or three days. It is not fair to disrupt the whole ward of old demented on account of those isolated cases. You have got to look out for the greatest good to the greatest number.

Mr. SMYSER. You have got to take them as a whole?

Mr. TAYLOR. Yes, sir.

Mr. SMYSER. You say that this process of classification and segregation is going on there?

Mr. TAYLOR. Yes; and I expect it is pretty nearly completed. I think they have occupied pretty nearly all of those new buildings, and that it is just about as near perfect as they can get it.

Mr. SMYSER. It would be proper to go on doing that?

Mr. TAYLOR. Yes, sir; but I think it has already been done and done properly. However, there was a great deal of excitement over there when Doctor White came. There were a lot of parole patients over there, and in his classification they had all their parole taken away and had to go back to the criminal department. Legally they are criminals, and that is where they belong; but from the physician's standpoint it seemed rather a hard thing. In the line of classifying them with regard to the greatest good to the greatest number they went back to the criminal building.

Mr. SMYSER. Is it not true that there are, in that asylum, a lot of people who could properly be classified simply as paupers?

Mr. TAYLOR. No, sir; I think not. The improper people there are criminals. A criminal, for instance, will be sentenced for life to one of these military prisons, and that is a pretty hard life. They want to get to St. Elizabeth's. It is an awful place over there, but still they want to go there. During the time I was there I saw a number of these people who were malingerers who had put up jobs on the prison authorities, and who would scream and become hysterical, and they would send him over to St. Elizabeth's. They would prove to be malingerers, and it would become a game of shuttlecock, backwards and forwards, until finally, I believe, the authorities thought it was cheaper to keep them there and board them than it was to transport them backwards and forwards across the continent.

Mr. SMYSER. That class of patients ought not to be there?

Mr. TAYLOR. I do not think they ought to be there; but how are you going to keep them away?

Mr. SMYSER. I understand that is not the fault of the institution. It is the fault of these gentlemen who have had seats down here for ten years.

Mr. TAYLOR. I do not think so.

Mr. SMYSER. What I want to get at is that this is the fault of the law.

Mr. TAYLOR. I think so, sir.

Mr. SMYSER. Have you ever called this to the attention either of the board of visitors or a House committee?

Mr. TAYLOR. I can refer you to a case that happened. There was a prisoner over there named Bromley, I think, who had committed some offense in the Philippines, or one of the tropical possessions. He had murdered somebody and he was sent to Fort Leavenworth as a

life-sentence man, if I am not mistaken. I guess he put up a pretty good job of malingering, because they landed him at St. Elizabeth's.

We all knew he was a malingerer there, and finally we sent him back to Leavenworth. He was very glad to go back because he thought he was going to get a pardon. He had not been there more than three or four days, however, before he was the most violent insane man ever known. When I left St. Elizabeth's there had been a lot of correspondence between the superintendent and the proper military officials in regard to him. I know that I saw correspondence from the superintendent calling the attention of the proper authorities to the fact that he considered the man was a malingerer and that it would be advisable to have some alienist examine him. The last I heard of it the man was still at Fort Leavenworth. I don't know whether they have succeeded in landing him at St. Elizabeth's again or not; but I think that if he is not there he soon will be.

Mr. SMYSER. Did you make any complaint about that to anybody?

Mr. TAYLOR. I did. I was instrumental in calling the attention of the superintendent to it and in bringing about the correspondence in regard to the matter.

Mr. SMYSER. Did you ever make any complaint to the sources I have suggested?

Mr. TAYLOR. I was an official under Doctor White, the head of the institution, and my duty ceased when I reported to him.

Mr. SMYSER. Take some of your jag cases. They frequently land over in St. Elizabeth's, do they not?

Mr. TAYLOR. They do not make a very long stay nowadays. They used to; but they do not now.

Mr. SMYSER. After you eradicate the cause the fellow is restored.

Mr. TAYLOR. He leaves very promptly, sir.

The CHAIRMAN. In bathing patients in your department, did you use the shower-bath system?

Mr. TAYLOR. The shower-bath system was partially used. The department with which I was connected was modern, and we always used the shower in that department; but we had the tub system too.

The CHAIRMAN. Did you ever hear of patients being bathed in the same water that had been used for other patients?

Mr. TAYLOR. No; and I would not have heard about that. They would have kept that from me. I watched as close as I could to see that such a thing did not happen.

The CHAIRMAN. You would have stopped it, would you not?

Mr. TAYLOR. I certainly would.

The CHAIRMAN. Did you often see the board of visitors there?

Mr. TAYLOR. I used to see them once a month.

The CHAIRMAN. Did they come there at specified times?

Mr. TAYLOR. They came there at a certain day in every month—a committee of the board of visitors. The board, as I understand it, is divided up into committees, and each committee is assigned a certain definite month in the year.

The CHAIRMAN. Was there any particular preparation made by you in the care of patients on that day different from other days?

Mr. TAYLOR. There was absolutely no difference in the care of the patients; but we used to clean the floors up, or something like that.

The CHAIRMAN. Did you ever send a whole ward of patients out on the hill, so that the board of visitors would not see them?

Mr. TAYLOR. I never heard of such a thing in my life until I read it in the newspapers the other day.

The CHAIRMAN. How long are the attendants on duty?

Mr. TAYLOR. I am a little hazy on that subject. The day force is on duty from about 6 o'clock in the morning until 5 or 7 in the evening, and they get a half a day each week, and then they have some Sundays off. They have a certain fixed allowance of time that they get off. I know I used to have to sign the absent list every morning, which was prepared by the supervisors. According to the law, they are allowed to be off a half a day each week, or something of that kind.

The CHAIRMAN. Do you think that the attendants are kept on duty too long and that there should be more attendants, so as to make the hours of service shorter?

Mr. TAYLOR. I do not believe it would be practicable, sir. It is a very hard thing to even divide patients up between two attendants. The responsibility of taking care of an insane man is an awful thing, and every time you divide it up you are interfering with the proper care of the patients. You are dividing authority, and you can not hold people responsible. My impression of the attendants over there was that they were more numerous than in ordinary institutions, so far as I could learn from reading the reports. I tried to keep up with the reports of other insane asylums, and I think the attendants there had better pay, better hours, and there were more of them.

The CHAIRMAN. Do the patients get used to one attendant and get restive when they have the attendants changed?

Mr. TAYLOR. Yes, sir.

The CHAIRMAN. That is the common experience in the treatment of insane people?

Mr. TAYLOR. Yes; it is practically the universal experience.

The CHAIRMAN. They get used to their section?

Mr. TAYLOR. They get used to their wards, and they will beg you, with tears in their eyes, not to move them from one ward to another. It is sometimes pretty hard to do what you think is right. A patient is in the hospital ward, who has been there and become attached to the ward, and the time has come for him to leave and another sick man to be put in his place; but you would hate mightily to move him. Then when a man in the convalescent ward gets sick and you want to move him down into the hospital, he will beg you not to move him. They become attached to the surroundings and to the attendants. I think the attendants over there, taking them by and large, are a mighty good set of people, and that they attend to their business. There are some that are very trifling.

Mr. SMYSER. Is that due to their make-up or the manner in which they get there?

Mr. TAYLOR. It is due to their make-up.

Mr. SMYSER. Who is responsible for getting that class of people in there?

Mr. TAYLOR. That is the only class of people you can get. The hospital is certainly not responsible for it.

The CHAIRMAN. You mean that it is hard work?

Mr. TAYLOR. No; it is not hard work for the class of attendants that you get. These farmer boys are just as green as grass when they

come there. They are not worth \$18 a month, and are not worth 18 cents. They couldn't make \$18 a month to save their lives on the farm, but in a few years there, if they attend to business, they get \$40 a month, which is pretty good pay for a farmer. I worked for four years in a machine shop and was making \$25 a month for the last year I was there, and was being pretty well paid for what I was doing.

Mr. HAY. Do you think a farmer does very well to get \$40 a month?

Mr. TAYLOR. I do not think many farm laborers get \$40 a month. They do not down where I live.

Mr. HAY. You confine it to farm laborers?

Mr. TAYLOR. Yes; these were farm laborers.

Mr. HAY. How many insane asylums have you ever been in?

Mr. TAYLOR. I have never been connected with any but these two. I have been through the insane asylum at Staunton, but just as a visitor. I was not a physician at the time. I was just going through from idle curiosity, like the average person does.

Mr. HAY. So that the only insane asylum you know anything about is this one?

Mr. TAYLOR. Yes, sir.

Mr. HAY. You spoke of their having more attendants here than they have at any other insane asylum.

Mr. TAYLOR. I made that statement, and at the same time said that it was from my reading of the reports of other insane asylums. When I was at St. Elizabeth's I was very much interested in that subject.

Mr. HAY. What reports of insane asylums did you read?

Mr. TAYLOR. I do not know that I can specify the names. I read the reports of a good many insane asylums in Ohio. Doctor Richardson, the former superintendent, was an Ohio man and exchanged with them. Since Doctor White has been there they exchange with a good many New York Institutions.

Mr. HAY. You were there nine months altogether?

Mr. TAYLOR. Yes, sir.

Mr. HAY. And you stated that in your opinion the hours for the attendants there were not too long?

Mr. TAYLOR. I don't think they suffered extremely from the hours. An attendant's duties are not particularly onerous except in certain wards. They are confining, but they go out to walk with the patients at certain hours of the day. In our hospital ward, for instance, we had an attendant to every ten patients; and in the convalescent ward, where the patients attended to themselves and did not require any attention at all, we had two attendants to thirty patients.

Mr. HAY. That was when you were there?

Mr. TAYLOR. Yes, sir.

Mr. HAY. Do you know how many attendants they have now?

Mr. TAYLOR. No, sir; I do not.

Mr. HAY. You said that you made investigations of complaints made to you by the patients. What sort of investigation did you make?

Mr. TAYLOR. When you are making an examination and trying to catch somebody who has done wrong you have to go about it in devious ways. It would sometimes be a week or ten days before I made

up my mind. I would question the other attendants and other patients whom I thought were in such a mental condition that their statement could be received with some degree of credence. I would have my supervisors, who, by the way, were mighty excellent men, conduct an investigation on their lines, and we would discuss it, and then we would make a report to the superintendent.

Mr. HAY. I understand you to say that the criminal insane have been segregated from the others?

Mr. TAYLOR. Yes; so far as it is possible.

Mr. HAY. Do you know of any cases now at that hospital where persons charged with crime are in any ward except in the criminal wards?

Mr. TAYLOR. I do not, sir.

Mr. HAY. You do not know with regard to that now?

Mr. TAYLOR. I know that when I was there and up to the time I left they were all back in Howard Hall. He is a criminal when he is under sentence. After his sentence has expired he is not considered as a criminal over there.

Mr. HAY. Do you know of any who have been tried or who have been charged with crime?

Mr. TAYLOR. No; not while I was there. They were all in Howard Hall, and I think the institution is responsible for the person of those charged with crime, and that is the only place we could keep them where we could feel sure they were safe.

Mr. HAY. Have you been connected with the institution in any way since you left?

Mr. TAYLOR. No, sir; not at all.

Mr. HAY. Have you been summoned as a witness?

Mr. TAYLOR. Yes, sir; I have been repeatedly summoned, and I have been over there to examine patients repeatedly.

Mr. HAY. For what did you examine them?

Mr. TAYLOR. I examined them for the appointment of a committee to take charge of funds that they had—back pension, etc.—and it was necessary to have a committee appointed to take charge of the fund and expend it for them.

Mr. HAY. You have been generally called upon to perform that duty?

Mr. TAYLOR. I do not know whether I have been generally called upon to do it, but I have been there repeatedly.

Mr. HAY. How many cases of that kind have you had?

Mr. TAYLOR. I should say between 20 and 30 cases.

Mr. HAY. Since you left there?

Mr. TAYLOR. Since I left there. It may be less than 20 or more than 30, but I am rather inclined to think it is between the two.

Mr. HAY. Are you paid a fee for that sort of service?

Mr. TAYLOR. In a great many of them I do not get a fee because they do not have enough money. The lawyer who summoned me would say: "Here is a man who can not afford to pay a fee of \$10, or here is another one who has not got enough to justify paying fees." I have always been glad to do it, and I have told officials and the attorneys who summoned me that any time they wanted me to testify to get money for these old people I would be very glad to do it. I do not know how many times I have gotten money for it, or how many times I have testified.

Mr. SMYSER. You do not go just because there is a fee in it?

Mr. TAYLOR. No, sir; it is a great pleasure to me to go over there to the asylum. I have a great many friends there, and I always go through the wards and see the patients I know.

Mr. HAY. Whenever there was money enough to pay a fee, you received a fee?

Mr. TAYLOR. Yes, sir; and I did not think it was an exceptional fee. It involved a trip over to St. Elizabeth's and a subsequent trip to court to testify, and the fee is \$10.

Mr. HAY. Who called upon you to do that?

Mr. TAYLOR. I was always notified by the attorney. The only attorney who has ever summoned me over there is Mr. Fenning. He has called me up and asked me if I had time to go over to St. Elizabeth's and examine a certain man in a certain department, giving me his name. Sometimes I could go and sometimes I could not.

Mr. HAY. You speak of people pretending to be insane. How many cases while you were there do you recall of that kind?

Mr. TAYLOR. I do not believe I can recall just at present more than two men. I know that there is a tradition over there about St. Elizabeth's that such things are there. This man Bromley, I recall now, and another named Sweigert, from Atlanta.

Mr. HAY. So that there are only a few cases you can recall, during the time you were there, of that kind?

Mr. TAYLOR. Yes, sir.

Mr. HAY. You speak of their being sent to the Pacific coast, or across the continent I believe is the way you expressed it. How many cases of that kind did you know of?

Mr. TAYLOR. Leavenworth is pretty near the coast.

Mr. HAY. It is about middle way, is it not?

Mr. TAYLOR. I don't know about that. I am not good in geography.

Mr. HAY. How many cases of that kind do you know over there?

Mr. TAYLOR. That is the only one. Whether this man Sweigert has gone back to Atlanta or not I don't know.

Mr. HAY. How often did the board of visitors come through your ward?

Mr. TAYLOR. I could not tell you. The board of visitors used to come over there every month. It was a physical impossibility for any one man to go through St. Elizabeth's in a day.

Mr. HAY. How often did they go through the ward while you were there?

Mr. TAYLOR. I suppose that they went through my department two or three times.

Mr. HAY. They would go through your 13 wards two or three times a year?

Mr. TAYLOR. I think they divided the institution up into departments, and they would take one department one month and the next department the next month.

Mr. HAY. You say they went through your ward two or three times a year?

Mr. TAYLOR. I think they went through that often, and it may have been oftener. I don't know about that.

Mr. HAY. You say Doctor White visited the wards every Sunday?

Mr. TAYLOR. Every Sunday.

Mr. HAY. Did he visit the wards in between times?

Mr. TAYLOR. I don't know, sir; I only went around with him on Sunday. Doctor White is a pretty busy man and so was I, and unless he sent for me I did not go to him. I have had him send for me on one or two occasions to go over the ward, and he would be looking after some improvement he wanted to make, to get some information.

Mr. SMYSER. Give us an instance of that.

Mr. TAYLOR. I recall one instance pretty distinctly about West Lodge. He was going through there to see about making some improvements in the fireproofing. It was an old rat-trap of a building that was there during the civil war, I think. They had that old building remodeled and rebuilt, and I remember going through there with him on one occasion.

Mr. HAY. Are there any other patients in Howard Hall except those charged with crime and who have been convicted of crime?

Mr. TAYLOR. I do not know how it is now, sir. At the time I was there it was the only place we had to put violent insane patients. We had to put some of them over there until they would quiet down so that they could be put in other wards. That was done very much against our wishes, because we had no other place for them.

Mr. HAY. Has any other place been provided since you were connected with the institution?

Mr. TAYLOR. I am under the impression that there has, but I would not like to make such a statement positively, because I am not connected with St. Elizabeth's any more.

Mr. WALLACE. Awhile ago you spoke of the impossibility of feeding through the mouth with a glass tube.

Mr. TAYLOR. Yes, sir.

Mr. WALLACE. Is that also true of feeding through the nose?

Mr. TAYLOR. It is much more true. There are more curves connected with it.

Mr. WALLACE. This witness, as I recall it, used the words "glass or metal" in the alternative. Would it be equally impossible to feed through the nose with any kind of a metal tube?

Mr. TAYLOR. You mean a solid metal tube?

Mr. WALLACE. He did not state that. He just said a glass tube or a metal tube. I think that is in the testimony somewhere. Do you know of any way in which a metal tube could be used?

Mr. TAYLOR. No, sir; I can not see how it could be.

Mr. BARCHFELD. Speaking about these glass and metal tubes, we had the testimony here of Doctor Reyburn, who said he had been practicing medicine in the District of Columbia for over forty years, and that in his professional career he had used feeding tubes possibly once or twice; that these tubes were either glass or metal, and were from 4 to 5 inches in length. As a scientific fact an œsophageal tube must be at least 14 to 18 inches in length? Is not that true?

Mr. TAYLOR. Yes, sir.

Mr. BARCHFELD. You said they were indented or marked?

Mr. TAYLOR. Yes, sir.

Mr. BARCHFELD. In your experience in your work in the hospital you stated that you found that feeding through the nares was more satisfactory than feeding through the mouth. Is that true?

Mr. TAYLOR. Yes, sir.

Mr. BARCHFELD. Can you conceive of a physician using a glass tube 4 or 5 inches in length which would not cause regurgitation of the food?

Mr. TAYLOR. No, sir; I can not.

Mr. BARCHFELD. What is the physiology involved in using a glass tube 4 or 5 inches in length? If the fluid came in contact with the glottis or epiglottis would it not naturally produce a spasm or convulsion?

Mr. TAYLOR. Yes, sir.

Mr. BARCHFELD. I am addressing you as a scientific man. As a matter of fact you think it is physically impossible to feed one with a glass or metal tube 4 or 5 inches in length, to get food into the stomach?

Mr. TAYLOR. Yes, sir; I do.

Mr. BARCHFELD. You believe further that a tube 14 to 18 inches in length made of glass or metal could not be used to feed patients through the nares or per mouth?

Mr. TAYLOR. Yes, sir; I do.

Mr. BARCHFELD. If what you say be true, the testimony given by Doctor Reyburn must be very radically wrong. Is not that so?

Mr. TAYLOR. One of us is certainly very far off the track.

Mr. BARCHFELD. I do not believe Doctor Reyburn ever fed a patient per nares or per mouth in his life. Occasionally you are required to use a syringe to force this liquid through these tubes into the stomach.

Mr. TAYLOR. Yes, sir.

Mr. BARCHFELD. You use an ordinary Davidson syringe?

Mr. TAYLOR. Yes, sir.

Mr. BARCHFELD. What do you think of hydrotherapy in the treatment of the insane?

Mr. TAYLOR. I think it is one of the very few hopes the insane have of recovery. I think it is of incalculable benefit to them.

Mr. BARCHFELD. Have you had any paretics under your care at that institution?

Mr. TAYLOR. Yes, sir.

Mr. BARCHFELD. Did you ever see a cure in a case of paresis?

Mr. TAYLOR. No, sir.

Mr. BARCHFELD. Did you ever see any amelioration of their condition?

Mr. TAYLOR. Their disease is one that has little intervals, but it is always down, down, down.

Mr. BARCHFELD. They apparently improve under the use of the water cure?

Mr. TAYLOR. I expect that, to a layman, they might have the appearance of improvement, but they do not to me.

Mr. BARCHFELD. They would not to a physician?

Mr. TAYLOR. No, sir.

Mr. BARCHFELD. You said that, so far as you knew, the attendants at St. Elizabeth's were getting better pay and had better hours than other asylums, and that so far as you knew it was one of the best managed and most progressive, from a medical standpoint, in the country. Is that true?

Mr. TAYLOR. It is, so far as I know.

Mr. BARCHFELD. You had been reading the reports of other institutions, showing the line of treatment they followed, the number of

attendants, the number of hours they worked, and the rates of wage paid?

Mr. TAYLOR. I was very much interested in the whole subject and I was keeping up with it.

Mr. BARCHFELD. What is your opinion of Doctor White as an alienist?

Mr. TAYLOR. I consider Doctor White one of the ablest alienists in the country. I think that his work in literature and in other lines stands away up in the top notch.

Mr. BARCHFELD. Do you believe him to be a world's reader?

Mr. TAYLOR. Yes, sir.

Mr. BARCHFELD. Of literature pertaining to the subject of insanity?

Mr. TAYLOR. I know him to be; I do not believe it.

Mr. BARCHFELD. And he is a writer on that subject?

Mr. TAYLOR. He is a prolific writer and is quoted all over this country and abroad.

Mr. BARCHFELD. On his specialty?

Mr. TAYLOR. Yes, sir.

Mr. BARCHFELD. Do you believe him to be a humane man?

Mr. TAYLOR. Absolutely, if I ever knew a humane man.

Mr. BARCHFELD. Do you believe him to be a lover of his fellow-man?

Mr. TAYLOR. I consider him so.

Mr. BARCHFELD. You do not think he would stand for any ill treatment of a patient by an attendant employed in his institution?

Mr. TAYLOR. I know he would not.

The CHAIRMAN. Did you know Doctor White before you went to St. Elizabeth's?

Mr. TAYLOR. I never laid eyes on him in my life.

The CHAIRMAN. You went in St. Elizabeth's after a competitive examination?

Mr. TAYLOR. Yes, sir.

The CHAIRMAN. Did he have anything to do with that examination?

Mr. TAYLOR. Absolutely nothing. It was twelve months before Doctor White was appointed.

Mr. SMYSER. I understand that the attendants over there are under the Civil Service and are selected in that manner?

Mr. TAYLOR. Yes, sir.

Mr. SMYSER. If you were the superintendent over there, in the light of your experience in the selection of attendants, would you prefer to select them from your own examination of the applicant and exercise your own judgment as to his fitness for the place, or would you prefer to have him certified to you by some board?

Mr. TAYLOR. I would rather examine him myself.

Mr. SMYSER. Why?

Mr. TAYLOR. Because I think I would know better what I wanted and what was necessary. I know the requirements to be fulfilled better than any board would know them.

Mr. SMYSER. That is, whether he knew why the pyramids of Egypt were built would be a matter of very little consequence, if he knew something about how to treat patients who would be submitted to his care?

Mr. TAYLOR. Yes, sir.

TESTIMONY OF WILLIAM L. QUAID.

WILLIAM L. QUAID, being first duly sworn, was examined and testified as follows:

The CHAIRMAN. How old are you?

Mr. QUAID. I am 30 years old.

The CHAIRMAN. Are you connected with the Government Hospital for the Insane?

Mr. QUAID. Yes, sir.

The CHAIRMAN. In what capacity?

Mr. QUAID. In the capacity of general clerk, but more particularly with reference to the direction of civil-service matters at the hospital.

The CHAIRMAN. Did you go there yourself under a civil-service examination?

Mr. QUAID. No, sir.

The CHAIRMAN. You were appointed by the superintendent?

Mr. QUAID. I was appointed by the superintendent with the consent of the Civil Service Commission.

The CHAIRMAN. You mean with the consent of the general Civil Service Commission?

Mr. QUAID. Yes, sir; of the Federal, not the local, board.

The CHAIRMAN. You mean that you did not have any examination by the civil-service board?

Mr. QUAID. I did not.

The CHAIRMAN. What did they have to do with it?

Mr. QUAID. The superintendent at that time, who was Doctor Richardson, requested the Commission to give me the position. They were then in need of what is known as the secretary to the local board of examiners at the hospital, and the Commission consented to his request and gave me a commission as secretary of the local board. That is the capacity in which I am now there.

The CHAIRMAN. Therefore you were appointed by Dr. Richardson?

Mr. QUAID. By Doctor Richardson, with the consent of the Commission.

The CHAIRMAN. When were you appointed?

Mr. QUAID. December 1, 1902.

The CHAIRMAN. What are your particular duties in connection with the civil-service work at the hospital?

Mr. QUAID. My particular duties are to receive applications, and to note the various features of the applicants as disclosed by the applications, and to give the applicant a certain rating on the personal questions as answered.

Mr. SMYSER. Have you got an application blank with you?

Mr. QUAID. Yes, sir.

Mr. SMYSER. Suppose you hand it up this way and let me look at it. I might want to go out there.

Mr. QUAID. Very well, sir.

(The witness produces the blank referred to, and the same is marked "Quaid No. 1.") (See page 1717.)

The CHAIRMAN. After this application is signed you say you rate it?

Mr. QUAID. Yes, sir.

The CHAIRMAN. Are these furnished by the General Federal Civil Service Board?

Mr. QUAD. Yes, sir.

The CHAIRMAN. It is a part of their regulations that applicants must file that?

Mr. QUAD. Yes, sir.

The CHAIRMAN. That application is signed by the applicant?

Mr. QUAD. By the applicant.

The CHAIRMAN. Then there is a certificate signed by two vouchers?

Mr. QUAD. Yes, sir; two vouchers.

The CHAIRMAN. Does anybody else sign it?

Mr. QUAD. No one else.

The CHAIRMAN. Then that application is taken to the hospital?

Mr. QUAD. It is taken to the hospital and presented to me.

The CHAIRMAN. Do you give the applicants any mental examination?

Mr. QUAD. No, sir.

The CHAIRMAN. None is required?

Mr. QUAD. None is required.

The CHAIRMAN. It is a general civil-service regulation that none is required for attendants in St. Elizabeth's?

Mr. QUAD. So far as I know. I have never heard of one being given.

The CHAIRMAN. Then how do you treat the applicant?

Mr. QUAD. This examination of the applicant is based mostly on physical condition. There is a relative rating of ten for these applicants, and physical condition counts five, age counts one, special qualifications count three, experience one, and physical condition five. Then we strike the applicant's general average.

Mr. SMYER. Then he goes in, hit or miss, if the average is right; all he has got to do is to average properly to get in?

Mr. QUAD. There is a physical examination and interview with the medical officers in the department before he is placed on duty.

The CHAIRMAN. Who makes the physical examination?

Mr. QUAD. The officer in charge of the medical department, and it is frequently made by Doctor Clark, who is a member of our local board.

The CHAIRMAN. He gives the physical rating?

Mr. QUAD. No; he does not give the physical rating, but he has the option of refusing to take a man if he is physically disqualified. We give the physical rating as disclosed in the application; but that must be verified by the physical examination.

The CHAIRMAN. In making appointments, is it necessary for the appointment to be given to the man who has the highest rating?

Mr. QUAD. No, sir. The superintendent can appoint anybody from the list, provided he is sufficiently qualified; that is, where one vacancy exists the superintendent is required to take one of the first three.

The CHAIRMAN. That is under the general plan of the civil service?

Mr. QUAD. Yes, sir.

The CHAIRMAN. And consequently he could not appoint the fourth man or the fifth man if he only wanted one?

Mr. QUAD. Not unless he had some objection to one of those three, and then the objection is referred to the Commission for action. If he has some objection, for instance, such as physical disqualification.

The CHAIRMAN. Do you find it difficult to get a sufficient number of applications?

Mr. QU Aid. Yes, sir; I must say that we do.

Mr. HAY. How many have you on the eligible list now?

Mr. QU Aid. I have on the eligible list now about fifteen; but the grade is so low that I hesitate to certify them.

The CHAIRMAN. What mark do they have to get, out of this total of ten, to be put on the eligible list?

Mr. QU Aid. Seventy out of 100.

The CHAIRMAN. You say you now have 15 on the eligible list?

Mr. QU Aid. I now have 15 male applicants on the eligible register, and some 30 or 40 females. The difficulty is not so great in securing females as it is with males.

The CHAIRMAN. Are there any vacancies now in the positions of attendants?

Mr. QU Aid. There are.

The CHAIRMAN. Do you know why they are not filled?

Mr. QU Aid. Because of the shortage of applicants.

The CHAIRMAN. In other words these 15 are not qualified?

Mr. QU Aid. I would not give one of them out; no, sir.

Mr. HAY. How many vacancies are there now?

Mr. QU Aid. I should say about five.

The CHAIRMAN. How are you going to remedy that?

Mr. QU Aid. We are going to wait for additional applicants. We are trying to reach applicants through our hospital force—some one to recommend them to us.

The CHAIRMAN. Do the fifteen that have passed remain on the eligible list forever?

Mr. QU Aid. No, sir; for one year.

The CHAIRMAN. You have no authority to appoint an attendant now, while that eligible list is in existence, have you?

Mr. QU Aid. Yes, sir.

The CHAIRMAN. How do you do that?

Mr. QU Aid. In this way: Where a promising applicant appears at the desk, and, upon sizing him up, it would seem that he is better adapted for the work than the men whom we have already rated, or who are rated at a low mark, we can place him on duty at once, because it is very obvious that he will outrank anybody who is on the eligible register.

The CHAIRMAN. So that you can hold this examination at any time?

Mr. QU Aid. Practically at any time.

The CHAIRMAN. Consequently if an applicant should come in who was qualified as you suggested, instead of being put at the bottom of the list he would be put at the top of the list, and then you can appoint him?

Mr. QU Aid. Yes, sir; we can appoint him.

Mr. SMYSER. It is like the Irishman's flea; now you see it and now you don't see it. Is that it?

Mr. QU Aid. It is hardly as bad as that.

(At this point Mr. Smyser took the chair.)

The ACTING CHAIRMAN. If any man presents himself there, irrespective of anyone of these applicants, and he should appear to be physically adapted to that service, he would be employed?

Mr. QUAID. He would; and it has been done. That occurs, you understand, when we are short of help, as sometimes happens.

The ACTING CHAIRMAN. Are you short now?

Mr. QUAID. Yes, sir; we are short now.

The ACTING CHAIRMAN. To what means do you resort over there to induce suitable persons to become attendants?

Mr. QUAID. The only means that I know of are that we endeavor to reach persons through our hospital employees—persons whom they may be able to recommend to us.

The ACTING CHAIRMAN. You do not advertise?

Mr. QUAID. The commission undertook to advertise at one time, when they conducted these examinations at their headquarters in town, but they gave it up for some reason or other; I do not know what the reason was. They passed the business over to the hospital.

Mr. HAY. Can you state, from what you have before you, the cause of the separation from the service of the several persons who have been spoken of in this inquiry?

Mr. QUAID. I can certify to several of them, I am sure; yes, sir.

Mr. HAY. I wish you would just state what you have before you.

Mr. QUAID. The first record I have here is that of Thornton O. Pyles, reemployed in the service of the hospital as an attendant March 1, 1902; discharged May 30, 1904, for conduct unbecoming an employee.

Certain correspondence is connected herewith, if you wish to have it.

Mr. HAY. Between whom is the correspondence?

Mr. QUAID. Between Doctor White and Doctor Gunnell, and between Doctor White and Mr. Pyles.

Mr. HAY. I think we might as well have that.

Mr. QUAID. Shall I read it?

Mr. HAY. Yes.

Mr. QUAID. The first is a letter from Doctor White to Mr. Pyles, dated April 18, 1904, as follows:

APRIL 18, 1904.

DEAR SIR: Replying to your note of this date, asking for an increase in salary, I have to advise you that you are now receiving maximum pay.

Very respectfully,

Superintendent.

Mr. T. O. PYLES,
Garfield 1st.

The next is from Doctor White to Doctor Gunnell, and is as follows:

MAY 27, 1904.

MY DEAR DR. GUNNELL: I inclose report of yesterday's proceedings. I believe it covers the points mentioned; if not, and you will return it, I will make such additions as you may suggest.

I find our friend Pyles's mental condition is pretty generally appreciated, not only here, but in Anacostia, and Doctor Stack tells me this a. m.—I don't know on what authority—that he has had a similar attack once before.

Many have expressed themselves as to his condition, so there would be absolutely no doubt as to our ability to prove it should occasion arise. I do not think, under the circumstances, that we can keep him any longer, as he can not be trusted either on the hospital grounds or in his capacity as head of a ward, so I will make arrangements to have him leave at the earliest possible date, preferably within twenty-four hours.

Respectfully,

WM. A. WHITE.

The next one is from Doctor White to Thornton O. Pyles, and is as follows:

MAY 30, 1904.

MR. THORNTON O. PYLES,

Attendant.

SIR: You are hereby notified that you are this day discharged from the service of the hospital for conduct prejudicial to the good order of the hospital and to the interests of the service.

You are notified to deliver immediately to the supervisor presenting you with this notification the hospital keys in your possession, and also to leave the hospital reservation without delay.

The chief clerk will pay you the amount of salary due you upon application.

Very respectfully,

WM. A. WHITE, *Superintendent.*

MR. HAY. Have you the communication that Mr. Pyles sent?

MR. QUAID. No, sir; I have no further record in that case.

MR. HAY. What became of them?

MR. QUAID. I never saw them at all.

MR. HAY. These were handed to you by whom?

MR. QUAID. These records I keep in my office in the hospital. It is a part of my duty to keep these records.

MR. HAY. Besides being a clerk of the Civil Service Bureau, you are what?

MR. QUAID. I am a general clerk.

MR. HAY. Private secretary to Doctor White?

MR. QUAID. No, sir.

MR. HAY. Has he a private secretary?

MR. QUAID. I think he has; I am sure he has.

MR. HAY. What is the next?

MR. QUAID. Townsend W. Belt, attendant, employed December 13, 1905, and permitted to resign March 27, 1906. Discovered asleep while supposed to be on duty, and was also under the influence of liquor. I have in my notes the case made at the time when he was permitted to resign, the following notes:

When the man asked for a copy of his resignation, this original was run through the copying machine and handed the copy to him. He was apparently under the influence of liquor and slapped the paper from my hand, demanding it should be signed by the superintendent. He was aggressive and threatening throughout the hall, and the odor of liquor pervaded the places where he went. He was given the signature of the superintendent, showing his resignation to have been accepted, and then he left the building.

WM. L. QUAID.

That was my personal experience with Mr. Belt.

I have here also certain correspondence about Otis A. Wilson, a discharged employee. I have here a note from Mr. Wilson to Doctor White:

800 PHILADELPHIA ST., CONGRESS HEIGHTS,
Washington, D. C., Feb. 3, 1906.

DR. WM. A. WHITE:

DEAR SIR: I would like to no if I can be reinstated at the hospital. I am out of work, and it seems like I can not get anything to do. Would you give me another trial? I worked under Dr. L. Stacks four years, and I think I gave satisfaction. Will you give me another trial under him? It seems very hard to get work at this time a year.

I will be very glad to hear from you at your earliest.

Yours, very respectfully,

O. A. WILSON.

To which the following reply was sent:

FEBRUARY 6, 1906.

MR. OTIS A. WILSON,
800 Philadelphia street,
Congress Heights, D. C.

DEAR SIR: I have received your note of recent date asking for reinstatement. You are informed in reply that your case having received due consideration and your dismissal for cause having taken effect, there is nothing now that can be done.

Very truly, yours,

WM. A. WHITE, *Superintendent.*

The following letter also figures in this case:

WASHINGTON, D. C., January 24, 1906.

DR. WM. A. WHITE,
Superintendent Government Hospital, etc.

MY DEAR SIR: Mr. Otis A. Wilson, who was recently discharged by you, is very anxious to be reinstated to the position formerly held by him, and I beg that you will permit me to say a word in his behalf. He tells me that up to the time when he was charged with having struck one of the patients no charge of dereliction of duty was ever preferred against him, and in view of his long and satisfactory service as an employee of your institution I indulge the hope that you may see your way to reinstating him.

I have no doubt that if you will do so you will not again have to complain of his conduct. He is a resident of Northumberland County, Va., and therefore a constituent of mine. My personal acquaintance with him is not very great, but I have known his family for many years. His father was one of the most respected citizens of his county, and I can not believe that a son of such a father can be cruel to anyone. I hope therefore that you may find it consistent with your duty to give Mr. Wilson another trial, and I beg to assure you that anything you may be able to do for him will be appreciated by

Yours, very truly,

W. A. JONES.

To which the following reply was sent:

JANUARY 29, 1906.

HON. W. A. JONES,
House of Representatives, Washington, D. C.

DEAR SIR: I have received your letter of January 24, written in the interest of Otis A. Wilson, formerly an attendant in this service.

I beg to state for your information that careful consideration was given the case of Mr. Wilson before his dismissal. As you mention in your letter, he was discharged for striking a patient, an offense within a hospital of this character that can not be condoned nor lightly treated with some disciplinary measure that might be applicable to other infractions.

I regret very much that favorable consideration of your request in Mr. Wilson's behalf is impracticable, but the circumstances of the matter render his reinstatement impossible.

Very respectfully,

Superintendent.

Bernard Allen has figured in this case. He was an attendant employed August 24, 1903, and discharged October 23, 1905. The cause of his discharge was insubordination; refused to perform the work assigned to him. That is an extract from the records of the hospital.

The ACTING CHAIRMAN. Who made up that record?

MR. QUAD. I make up the records.

The ACTING CHAIRMAN. How do you make it up; on what information?

MR. QUAD. The reports as to the conduct of employees are brought to my office as soon as the transactions take place, and I make notes of the case and file them in folders similar to this.

The ACTING CHAIRMAN. So this is simply the result of what comes to you?

Mr. QUAID. Yes, sir.

Mr. HAY. You do not know anything personally about it?

Mr. QUAID. I only transmit the report to the commission.

The ACTING CHAIRMAN. It is easy to make up the report and undertake to bind the fellow by it when he does not know anything about it.

Mr. QUAID. We frequently give these people an opportunity to answer these things.

The ACTING CHAIRMAN. Was there any answer made in that case?

Mr. QUAID. No; that man was summarily dismissed.

Mr. HAY. For insubordination?

Mr. QUAID. Yes, sir; for insubordination.

The ACTING CHAIRMAN. I would not want to judge him by your records unless he had something to say about it. If that was the rule, I could go down the street and stigmatize some fellow as a horse thief and have it entered on some record and bind him by it.

Mr. QUAID. He was told at the time of his discharge, and he entered no protest.

The ACTING CHAIRMAN. Do you know that personally?

Mr. QUAID. I only know it from the report made to me by the supervisor. I know that he came and got his pay. I know that he has left the hospital and that he is reported as discharged.

Mr. HAY. He says he was discharged because they wanted him to take a wheelbarrow and clean up around the buildings, and he refused to do it. Was he an attendant?

Mr. QUAID. Yes, sir; he was employed as an attendant.

Mr. HAY. Was the duty of an attendant to clean up around the buildings?

Mr. QUAID. It frequently happened that attendants have been sent out to clean around the buildings; yes, sir.

Mr. HAY. Is that contemplated in their employment?

Mr. QUAID. There is no contract entered into with regard to any specific duty, so far as I know.

Mr. HAY. They are under the orders of the supervisor?

Mr. QUAID. Yes, sir.

Mr. HAY. And they have to do whatever he tells them?

Mr. QUAID. They are under orders; yes, sir.

The ACTING CHAIRMAN. Go ahead.

Mr. QUAID. The next one is Spencer Herbert, launderer, employed September 21, 1903, and discharged September 23, 1905. He left the laundry without giving notice, the force being crippled, and it became necessary to send for an employee who was on leave to fill his place.

The ACTING CHAIRMAN. You would characterize that as what?

Mr. QUAID. I characterize that as leaving without the required notice of two weeks.

Mr. HAY. You mean to say that he simply left the hospital?

Mr. QUAID. He simply quit the hospital.

The ACTING CHAIRMAN. He walked off; he took French leave?

Mr. QUAID. Yes, sir. The next is Harry Satterfield, launderer. He was employed December 1, 1900, and discharged March 29, 1906, for abuse of patients in the laundry. There is some correspondence in this case.

Mr. BARCHFELD. Read the correspondence.

Mr. QU Aid. Yes, sir; the first letter is one to Harry Satterfield, dated March 12, 1906:

MARCH 12, 1906.

HARRY SATTERFIELD,
Laundry employee.

Accusations are on file in this office in which you are charged with maltreating patients working in the laundry. These charges allege acts on your part in the mistreatment of patients for a period extending over two years' past.

You will be given an opportunity by presenting yourself at this office to make such reply to these statements as you may be able.

WM. A. WHITE, *Superintendent.*

The next one is a memorandum of instances of maltreatment of patients charged against Harry Satterfield:

At a time about two years ago is accused of having caught a patient by the collar and jammed him up against the wall and of starting to strike him.

Charged with slapping, beating, and kicking a patient called "Deanie" last September a year ago. Also of beating a patient called Little Joe last September a year ago. Also with striking and slapping a patient whose name is given as O'Grady. Also with knocking down a patient called Willie. Also with striking Alphonso Rolling as the patient was shaking out pillow cases.

Mr. QU Aid. The complaint comes from James W. Burroughs. I may say that Mr. Satterfield filed his reply and the following letter was written to him after his examination.

MARCH 29, 1906.

HARRY SATTERFIELD,
Laundry employee.

The charges against you of mistreatment of patients have been carefully reviewed, as have your written defense and the statements made through examination of the persons whose names you affixed to your paper as witnesses in one particular case.

It becomes necessary to inform you that the preponderance of evidence is against you and that the charges are held to be sustained.

You will understand the hospital has no further need of your services and that your separation will take place on receipt of this communication.

WM. A. WHITE, *Superintendent.*

The ACTING CHAIRMAN. You say he wrote a letter?

Mr. QU Aid. Yes, sir.

The ACTING CHAIRMAN. Have you got that?

Mr. QU Aid. I think I have that; yes, sir.

The ACTING CHAIRMAN. Just look and see.

Mr. QU Aid. I have a mass of that matter here. I have here a lengthy statement from Mr. Satterfield.

The ACTING CHAIRMAN. Read it.

Mr. QU Aid. It is as follows:

U. S. GOVERNMENT HOSPITAL FOR THE INSANE,
Washington, D. C., March 19, 1906.

I (Harry Satterfield) do hereby swear that I have never kicked, thumped, beat, assaulted, or mistreated any patient during my whole period of service in this institution.

HARRY SATTERFIELD.

DISTRICT OF COLUMBIA, ss:

Subscribed and sworn to before me this 19th day of March, 1906.

FRANK M. FINOTTI,
Notary Public.

ANACOSTIA, D. C., March 15, 1906.

Dr. WM. A. WHITE,

Superintendent, U. S. Government Hospital for the Insane.

DEAR SIR: When I had charge of working the patients in the laundry department which covered a period, as near as I can call, from 1903 to 1904 up to the time Mr. Manche assigned me to the wash room, when McMurray came back from his vacation, which was the first week in January, 1905, with instructions from Mr. Manche to cut down the amount of soap used in the wash room, which I did, and in my doing as I was ordered I have had to put up with every unfair treatment from McMurray as he well knew that in my following out my order it would show him up as to the kind of a washer he was and that the work has been turned out in good shape and I think to the satisfaction of the boss, as I have not heard any complaints.

This ill feeling kept growing with McMurray and his influence with Burroughs to show his manner toward me as I will show later on and feel safe in saying that Burroughs is at the bottom of causing the accusation being made against me. In lying, to lay this trouble on me, I can safely say it was all planned by McMurray, as he still visits the sleeping quarters over the bakery where Burroughs sleeps, and Burroughs is the one that is carrying out their plot, as it can not be taken with any sincerity on his part nor the other that their sympathy should show so plainly in behalf of the patients within the last few weeks only, Burroughs is now and has been acting the part that McMurray was acting before he was discharged which is well known by persons working in the laundry and anybody showing as little interest in their work as this man is doing daily does not reflect any credit to him, any more than the position of influencing others to promote his selfish feelings in accusing me of acts which are grossly exaggerated, of which malice and prejudice are at the bottom, as I am positive he can not give any reasonable excuse for not speaking to me. I would like to explain to you and prove that this all is a made-up plot by Mr. Burroughs.

When Mr. McMurray was working here he and Burroughs were great friends, and when Mr. Manche refuted charges against McMurray they both got down on me because I did not lie for McMurray and Burroughs, from that time, did not speak to me any more and he also influenced the other man, Baldwin, who was working in the wash room at the same time, not to speak to me also, and then Mrs. Burroughs stopped speaking to me. Shortly after charges were preferred against McMurray I heard a rumor that Mr. Burroughs had or intended putting charges in against Mr. Manche, and I also seen Mr. Burroughs, Mrs. Howard, Mrs. Burroughs, and Miss Dement holding communications morning and noon hour, but not when Mr. Manche was about, but what they were planning to do I did not know, but their actions were watched by me and many others and I have strong reasons to believe they are the ones that preferred these charges against me, if they are, anyone can see that it was done because I did not side in and lie for McMurray when he was tried before you.

Prejudice is a very poor excuse for any one to rely on, but when it is plainly shown and at least a dozen or more persons in the department could back up my statement, I feel it most convincing, the fact that does exist, without any possible doubt that a motive being the case of these accusations, I can not help from using it in my defense of my position, you can readily see I was faced to a certain extent to lead McMurray, Burroughs, and Baldwin to believe I took sides with them only for the protection. I must necessarily give myself, for, if any one case, they thought or knew that I opposed them in favor of informing the boss would have caused them bitterness toward me and the results of three against one, even though just or unjust, would have placed me in a bad position, backed up by three or four more who took sides with them.

What kind of a show would I stand with a pack of deceitful persons ready to swear away anybody's reputation for their personal gains, as I have known as long back as three months ago?

McMurray's intentions of getting Mr. Manche's position, as heard of in the laundry, and Burroughs aiding him as much as he could with the promise of acting as assistant, with Mrs. Burroughs and Miss Dement falling in line as favorites to assist in the stronghold of McMurray in discharging the duties of "boss."

Here it can be seen I would have had as much of a show as a lighted candle in a windstorm, as this was planned that them four would stick together, and whoever they found in the way of their plans being carried out would be branded as a victim, and if not discharged would be obliged to leave in time, as it would be made very unpleasant for them providing their scheme held out.

Mr. Manche had not in any way told me that the working force of patients was criticised by him nor anybody else until the notice handed me to-day of accusations of the mistreatment of those patients which were under my charge.

When Mr. McMurray had charge of those patients, which time covered a whole year, and nobody accusing him, as to my knowledge, of mistreatment on his part, when he certainly must have had to take hold of patients which frequently happen to get in trouble with one another, which I acknowledge I have had to do a good many times when they were under my charge.

But I deny all charges of maltreatment of the patients. I did not act any different there than anyone else in my place would have done. In case of a patient becoming unruly it was someone's duty to restore order and try to quiet the excited ones, which I tried to do. I did not in any way abuse or mistreat any of them, as I was obliged to use whatever strength it required to overpower them or it would be hard to say what I would have received at the patients' hands, as I remember very well the case when the patient Willie is referred to. I will show proof to you in the instance referred to in the maltreatment of the patient Willie, by three of the employees who were eyewitnesses, that I did not mistreat him in any way.

As to the patient called Joe and Mahrlaen, which is the same patient which charged me with beating him, it is not true, as Mr. Manche was an eyewitness to that affair, and I know that he would not stand by and see anyone thump any patient, as he had told me and all the other men in the laundry more than once that he would discharge anyone he caught or even heard of their mistreating a patient.

I refer him to you in this case.

Rollins is a highly nervous and flighty patient, and any dealing with this patient could be misconstrued by any evil-thinking person.

In the case of Pat Crowins he is a very bad tempered patient and more than once I have had to take hold of him. An incident happened only about three or four weeks ago—this patient grabbed one of the female colored patients which was passing by him and Baldwin took hold of him and a tussle resulted.

I came around and seeing the tussle told Baldwin to let go of him, that he would come around all right. E. Boswell can vouch for this statement. Also that Mr. Burroughs afterwards said to her, "What do you think of Harry reporting Baldwin to Mr. Maenche about Pat?" This remark shows, as I have already stated, his feelings toward me; it also shows his willingness to shield Baldwin, also his criticising me for reporting the affair to the boss. If this man's feelings are as he tries to make them appear I can not understand why he will accuse one and shield another, as shown very plainly in his remark.

In the case of O. Bready, as coming from Burroughs, I offer the above in my defense.

I don't know of any patient and inquiries from the boss fails to recall any patient by the name of "Demie," by sir, "given," or nick name, nor by the name of O'Grady, that even worked in the laundry.

In the case of the patient Timothy, a paroled patient that comes in here very often, but does not belong to the regular force, comes and goes, sometimes works, other times he doesn't.

I acknowledge as teasing him, which I know was wrong to do, but I have seen others do the same, but did not think it would be taken as abuse.

Yours, respectfully,

HARRY SATTERFIELD.

The ACTING CHAIRMAN. What is the date of that communication?

Mr. QUAID. That communication is dated March 19.

Mr. HAY. At the time these charges were made against this man Satterfield, or before or after that time, were any charges made against the foreman, Maenche?

Mr. QUAID. There were charges made against the foreman, Maenche, by Mr. Burroughs, but to the best of my recollection they were filed following the trial of Thomas L. McMurray.

Mr. HAY. What became of those charges? Have you anything there to show anything about them?

Mr. QUAID. No, sir; I have no charges of that sort here.

Mr. HAY. What became of them?

Mr. QUAID. They were brought to my office by the Superintendent for filing.

Mr. HAY. Was any investigation of those charges made?

Mr. QUAID. Yes, sir. There was an investigation made.

Mr. HAY. Have you any record to show that?

Mr. QUAID. I have a record at the hospital; yes, sir.

Mr. HAY. I would like to have that.

Mr. QUAID. The record you wish is the record of the case against—

Mr. HAY. Maenche, I am talking about.

Mr. QUAID. No; there was no hearing, as I understand, in the case against Maenche; but Mr. Burroughs appeared in the superintendent's office when I was present, and offered to prove abuse of patients. Testimony was taken in that connection, and the dismissal of Harry Satterfield was the result.

Mr. HAY. But were any charges made against the foreman of the laundry, Mr. Maenche?

Mr. QUAID. Yes; there were charges made against the foreman of the laundry.

Mr. HAY. What became of those charges?

Mr. QUAID. I know of nothing being done with those charges, except as he might be involved in the abuse of patients.

Mr. HAY. What were the charges?

Mr. QUAID. There were charges brought in on two occasions. The first time charges were brought in there there was a statement made of alleged drunkenness on the part of Mr. Maenche.

Mr. HAY. Charges made by whom?

Mr. QUAID. By Mr. Burroughs. That was placed in my hands for filing, and I placed it in Mr. Maenche's folder. Subsequently other charges were brought in alleging abuse of patients in the laundry, and they were placed in my hands for filing, and were filed. Following the filing of those last charges the superintendent on two occasions asked me what had become of Mr. Burroughs, and if I knew anything of what he intended to do in relation to pressing these charges. The second time Dr. White came to me he told me to call up Mr. Burroughs by 'phone and get him to his office and ask him what he was going to do about the second set of charges. That I did, and I was present when Mr. Burroughs and Dr. White had their interview. Dr. White asked Mr. Burroughs what was the delay, and Mr. Burroughs said "I misunderstood you; I thought you believed that I was lying and that I couldn't prove these charges." Dr. White asked him then what he could prove, and what he wanted to press in regard to the laundry, and he said particular "abuse of patients." The superintendent told him "If you know anything about the abuse of patients, come and bring your witnesses." That was the morning of March 7, 1906. I remember that date because the first witness was called that morning, Mrs. Klugg.

Mr. HAY. Was any investigation ever made of the charge of drunkenness against the foreman of the laundry?

Mr. QUAID. I know of none, not as far as my relation with the office goes.

Mr. HAY. How were these charges made by Mr. Burroughs?

Mr. QUAID. They were in written form.

Mr. HAY. Have you that?

Mr. QUAID. I have not those with me; no, sir. Mr. Burroughs left

by resignation, and I have not those charges with me. In fact, I believe those charges have been placed here in evidence.

Mr. SMYSER. I think that matter was handed in to the committee.

Mr. QUAID. That is true; that is in your possession. It is not on my files.

Mr. HAY. Who is the next?

Mr. QUAID. The statement of Harry Satterfield I have read to you.

The ACTING CHAIRMAN. Before you leave that, Mr. Quaid, the charges against Satterfield go back a considerable length of time.

Mr. QUAID. Yes, sir.

The ACTING CHAIRMAN. Do you know why the delay in the presentation of these charges against Satterfield occurred?

Mr. QUAID. No, sir; I do not know why the delay occurred.

The ACTING CHAIRMAN. In other words, did Doctor White, to your knowledge, have knowledge of these various charges that finally culminated in the dismissal of this man Satterfield?

Mr. QUAID. To my knowledge, he had no information of them at all.

The ACTING CHAIRMAN. This all seems to have come when conditions at St. Elizabeth's were being aired in the House—about the time that this investigation began.

Mr. QUAID. Yes; the laundry controversy over there began about January 22, with the hearing in the case of Maenche v. McMurray, charged with a number of offenses, including excessive use of materials and threatening attitude toward a patient.

The ACTING CHAIRMAN. And then came the countercharges against Satterfield and Maenche?

Mr. QUAID. Then came the countercharges against Maenche, and Mr. Burroughs filed charges against Mr. Satterfield.

Mr. HAY. Did not Mr. Burroughs file these charges against the foreman, Mr. Maenche, on the 10th day of January, 1906? Look at that, will you [handing a paper to the witness]? That communication is dated January 10, is it not?

Mr. QUAID. Yes, that is dated January 10. I had no recollection of the date of that communication, and I can not tell you when it came to my office.

Mr. HAY. There is one dated January 24.

Mr. QUAID. January 24; that was with reference to additional witnesses, I believe.

Mr. HAY. No; this says: "I hereby refer charges against E. L. Maenche of neglect of duty in not reporting Mr. Satterfield for refusing," etc.

Mr. QUAID. Yes, sir; I remember that.

Mr. HAY. These are charges against the foreman.

Mr. QUAID. I recall that communication.

Mr. HAY. You say these charges against the foreman have never been investigated?

Mr. QUAID. To my knowledge, I know of no investigation. I have other records here, sir.

Mr. HAY. Go ahead with them.

Mr. QUAID. The next is the case of James Burroughs.

Mr. HAY. Was that the man—

Mr. QUAID. That is the man we have just been speaking of. The papers in reference to Mr. Burroughs are as follows: He

was employed October, 1903, and resigned April 17, 1906. He was called upon several times to explain complaint of nonpayment of debt. Charges had been preferred against him a short time before he was permitted to resign. The charges were neglect of duty, filed by the foreman of the laundry. Those charges are here, and they were never acted upon.

Mr. HAY. You say he resigned voluntarily?

Mr. QUAID. Yes, sir; he resigned voluntarily.

Mr. HAY. Who comes next?

Mr. QUAID. You do not wish to have me read the charges against Mr. Burroughs?

Mr. HAY. I do not care to have you read them. You can put them in the record.

The charges referred to are as follows:

U. S. GOVERNMENT HOSPITAL FOR INSANE,
Washington, D. C., March 31, 1906.

Dr. WM. A. WHITE, *Superintendent.*

DEAR SIR: The discipline of this department has been for some time greatly impaired, and it still exists between two separate factions. Of one faction there are only a few; it does not consist of a majority by any means. At this unavoidably prolonged date I cite causes which, if in your judgment receive an early adjustment, would be found beneficial to the department.

January 4. Burroughs made no effort to catch up with his work (due to a holiday), it being behind; I was obliged to have the other washman, who had finished his wash, do Burroughs's work to finish up for the week.

January 5. Carelessness in washing. He washed a white stand cover in with red table clothes. (Sample shown the superintendent.) At another time, in February, a pillowcase washed with sacks; at a later date handkerchiefs washed with socks, and also a napkin. After repeatedly cautioning him about the loading of his wheels, in return I got these remarks: "You are unreasonable; I will wash what the men send up to me in my loads. The men in the basement are paid for that work. I am not a sorter; I am a washer." Disobedience of orders and insolence are well defined in the above. He has repeatedly assisted his wife in sorting.

January 6. Bad washing. Neglects his work, but assists his wife in doing her work. I never gave him any such permission, and in my judgment sufficient help always being at this work did not warrant his assistance.

About six months ago I cautioned Burroughs in this way: "Don't allow the patients to load your wheels, because you don't know what the load may contain to do damage to the load in washing." I also said it is well enough to let patients do the unloading, but not the loading. He treated me with indifference, and I noticed later on in the day he took no heed to my orders, as I saw patients loading the wheels. I then approached him and demanded him to stop the patients and do that part of the work himself. He started to argue with me, but I stood my ground and saw then that he obeyed me; but it was not many days after he had the patients doing that work, and he was still letting them up to last day he was at work. From this time on until present time he has acted disobedient, ignoring me entirely, even to the extent of repairs on his machines, fixing of belts, packing of valves, never reporting to me anything needing attention.

I have known one of his wheels having belt broken to stand nearly a half-day until some of the other men would call my attention to it; to the extent this man has ignored me. He would wait until noon time or evening, and then see one of the men himself and report a belt needing lacing. I then consulted the chief engineer, and he said he would issue orders not to do work in the laundry only through my orders. This was done only as to try as a last resort to persuade Burroughs to do only what was his duty required. He has acted defiantly with me ever since, never speaking to me only when obliged to, and that would be when he wanted a day off, and lately he has totally ignored me in this, as he is absent from duty at present.

As far back as September, 1905, he done the same thing; never even intimating he would like the position of sorter, when he approached you for the place. I presume he blames me for his not getting the position. None of the rest of my help

ignore me in the assignment of duties, this authority being vested in me by you at the time the wage scale for this department was readjusted some two or more years back. Your words: "The maximum and minimum pay will be respectively (as specified) and you can assign them to their duties."

January 9, 3.45. Patients unloading his wheels. Burroughs told men in basement he did not want any more wash sent up until morning.

January 10. Wheels empty. Burroughs in basement talking with sorter. I censured men for not sending him work. They admitted (after talking with the sorter) that instructions were given them that were contrary to my standing orders, which I have had in vogue since at least 1901, the regular routine to be followed each week (barring mishaps).

No. 1. Wash wheel sheets washing one hour thirty minutes. Time turned in on my report to Mr. Sanger.

2 p. m. Burroughs and Baldwin talking and laughing together. Patients unloading wash wheels. Defiance bitterly shown here. He will let his wheels stand from 11.30 a. m. until after dinner, so patients can do his work.

January 10. Cautioned Burroughs about the clothes being so dirty after washing.

January 12. Four wash wheels not unloaded from 3 p. m. until 7.45 to 8 a. m. January 12.

January 20. Burroughs pulling up clothes on elevator. A man assigned at that time was there talking to one of the girls, Nellie Dement. Burroughs last October or November flatly refused to pull that elevator. (I was short a man.) The occasion you might recall; I was over that a. m. to see you on business, and on my return, then nearly 10 o'clock, not a load had been hauled up from the basement. I have explained this particular instance to you shortly after it occurred. I then put a patient to pull elevator up. I have learned since it was a prearranged plan to refuse to do it.

January 24. Ordered Burroughs to utilize all time possible in washing, so they would come out cleaner.

On three different times left department; did not report his going nor when he returned.

Three heads of department have assured me that all along from the beginning of McMurray's trouble up to the present Burroughs has heartily supported him and his cause. That cause and the interests here being so far apart shows conclusively that my interests and the interests of this department must be sacrificed.

Some of my employees have volunteered information that he does and is still opposing me in the preservation of discipline and good results.

I can furnish more than is shown here if required, but will add one more.

January 30. In my office, while talking to Burroughs about his wash-room slips, dated January 20, 1906, he flew in a rage, and shaking his finger in my face said: I would willingly sacrifice a million to oppose you if only to benefit those who are here and those who are to come, adding, you're a low-lived, common drunk, and I can prove it by a dozen persons. Inasmuch as he has written you on this question, does it imply that he has any right whatsoever to subject me to these insulting slurs, a subordinate, who during working hours, called on for information concerning his work, ignores me on that point, treating me with such insubordination as I have yet to meet with its equal.

I herein charge willful negligence, insulting insolence, insubordination, and disobeying orders, the last mentioned of which only several days ago you assured that those employed under me must obey my orders, and you were here to sustain me in seeing they were obeyed. Results were inspected by you March 19 in your office.

Most respectfully,

EDW. L. MAENCHE,

In charge Laundry Department.

Mr. QUAM. Here is the case of Thomas L. McMurray, launderer; employed September 23, 1901, discharged January 22, 1906; misconduct toward a patient and excessive use of material in the laundry. There are a number of communications in connection with that. The charges against Mr. McMurray are here. Here is a letter of the superintendent to Mr. McMurray, a sworn statement of Harry Eno, as to seeing McMurray in a threatening attitude toward a patient; here is the dismissal of Mr. McMurray by the superin-

tendent, and some letters relative to the record of Mr. McMurray outside of the hospital, in other laundries.

The above-mentioned charges and documents are as follows:

Copy of charges preferred against T. L. McMurray, employee of laundry.

General incompetency, as follows: Absence from duty, no excuse; excessive waste of material, destruction of linen, threats to do bodily harm, ignoring special order of superintendent governing laundry help. (Letter December 5, 1903.) Disobeying orders emphasized with improper language. Act with intent of striking patient.

EDW. L. MAENCHE.

Filed January 22, 1906.

JANUARY 22, 1906.

Mr. T. L. McMURRAY, *Employee, Laundry*:

You are hereby notified that charges of inefficiency have been preferred against you by the head of your department, which involve neglect of duty, conduct unbecoming an employee, improper language, and disobeyal of orders.

An opportunity will be given you to make any reply that you may care to file in relation to the charges brought against you before final action is taken looking to your separation from the service of the hospital.

Superintendent.

Statement of Mr. Eno.

Mr. Harry Eno appeared at the hospital this morning, February 3, and with reference to the alleged actions of Mr. McMurray at the laundry in connection with the patient, Thompson, stated in substance that he was at work in the laundry, probably sometime between the 3d and 6th of January last, and that he saw McMurray and the patient, being distant from them about 25 feet. He saw McMurray have hold of the patient with his left hand, his right hand raised and in the attitude as if he were about to strike the patient. He could not state whether he did so strike the patient or not. Mr. Eno recalls that this occurred about quarter to 11 o'clock. He recollects the time because Mr. Maenche, desiring to set his watch, asked him.

In Mr. Eno's previous statement, made to me on the 26th of January last regarding this occurrence, he was unable to recall the substance of any conversation had with Mr. Maenche on the matter, but would not state that he had not had any conversation. He now recalls, having given the matter some thought, that shortly after the above-described occurrence, Mr. Maenche said something to him about an employee striking a patient, referring, as he understands it, to the occurrence above outlined as between McMurray and the patient Thompson, and Mr. Eno replying, stated that if he had anyone working for him who struck a patient he would discharge him.

HARRY ENO.

DISTRICT OF COLUMBIA, ss:

Subscribed and sworn to this 3d day of February, 1906.

FRANK M. EINOTTI,
Notary Public.

JANUARY 29, 1906.

Mr. T. L. McMURRAY, *Laundry, Hospital*:

You are hereby notified that your services are no longer required at this Hospital, your separation to date from the time of your suspension, January 22, 1906. This action is taken for the good of the service.

WM. A. WHITE, *Superintendent*.

JANUARY 25, 1906.

Mr. A. WILSON,

*West Philadelphia or Fairmount Laundry,
Lancaster avenue and Thirty-ninth street, Philadelphia, Pa.*

DEAR SIR: You have been mentioned as having had once in your employ in Washington, D. C., one T. L. McMurray, who has been employed in the laundry at this institution for some time, and who says he served under you at the Dexter Plant and the Raleigh Electric Laundry, both of Washington, when you were connected with them. I should esteem it a favor if you would tell me if you have any recollection of the character of the service rendered for you by McMurray and whether he caused any friction among the force, or left your service in good standing. A reply will oblige, and I thank you in advance for the same.

Very truly, yours,

JANUARY 24, 1906.

Mr. HARRY ENO,

Jackson street, Anacostia, D. C.

DEAR SIR: You have been named as witnessing, some time ago, the act of one T. L. McMurray, employed in the laundry at this hospital, in being in an attitude of striking a patient there. If you have any recollection on this point, or any information to offer in explanation of the alleged act, I shall be glad to hear from you, as it may aid materially in a case now under investigation.

Very truly, yours,

WM. A. WHITE.

WASHINGTON, D. C., January 25, 1906

Dr. WILLIAM A. WHITE,

Superintendent U. S. Government Hospital for Insane.

DEAR SIR: About the 15th of March, 1905, I arranged with T. L. McMurray to set up a dry room for me in my laundry. He was to do the work for me on Sunday. His efforts to put the dry room on the ceiling convinced me he knew very little about that kind of work. The best part of the day was past without any results; then I suggested to Mr. McMurray that he would better follow my instructions. The results are, the dry room is standing as erected by me, with his assistant. I am convinced Mr. McMurray's experience is very limited along this line of business. I think I paid him about \$3.00 for his labor. I am willing at any time to appear personally to corroborate the above.

Respectfully,

CHAS. R. HOOPER, *Seventh and O streets, SW.*

FAIRMOUNT LAUNDRY,

Philadelphia, January 26 1906.

WM. A. WHITE, M. D.

DEAR SIR: Yours of the 25th instant received. In reference to T. L. McMurray, in reply, would state while in my employ in Washington, at both laundries mentioned, I had great trouble with him as to sobriety. I was building up a broken-down concern; would leave him in charge during my absence, and return to find him so beastly drunk he was entirely unconscious. I gave him several trials, finally discharged him for the above cause; then he became abusive to me.

When I returned to Philadelphia I needed a washer. He was out of employment at that time. I sent for him, he accepted the position, was here three or four months. I can say he never showed any signs of liquor during that period, but proved himself incapable of turning out good work, or regular work, and finally discharged him.

As to causing friction among the employees, I never gave him any authority; always kept him as a subordinate after my Washington experience.

Confidentially, he is not capable of taking charge of a plant, is my candid opinion.

Trusting the above is what you desire, I am, yours truly,

A. R. WILSON.

The next case is that of Robert Lloyd Green, better known as Lloyd Green, attendant, employed May 4, 1904, and discharged October 30, 1904, for overstaying leave several times, and asleep on night duty.

The next case is that of Owen S. Allen, employed as attendant, west side, September 15, 1900. Transferred from west side to night watch, new buildings, January 19, 1904. Salary \$300. Removed by the superintendent March 10, 1904, for neglect of duty and the use of intoxicating liquors on the hospital grounds the night of the 10th instant.

The next is that of Patrick O'Connor, laborer-attendant. Employed November 10, 1894; discharged December 27, 1902 (cause not clear on record). Taken on as day laborer September 7, 1905. Discharged January 6, 1906. Inefficiency.

I think those are all the letters I have, except some more letters from outside parties relative to the laundry.

Mr. HAY. That covers all the cases of the persons who have been before the committee?

Mr. QU Aid. Yes, sir; so far as I have any reference.

Mr. HAY. So far as you know?

Mr. QU Aid. Yes.

Mr. WALLACE. Were those persons sworn before the committee, the superintendent, or the physicians?

Mr. QU Aid. You mean at whatever investigations were conducted?

Mr. WALLACE. Yes.

Mr. QU Aid. They made their statements to the superintendent in the presence of a stenographer. Their statements were taken down and placed on the typewriter, and they swore to their statements then, before a notary.

Mr. WALLACE. They are in the hospital now?

Mr. QU Aid. What particular persons do you mean; you mean the persons who testified?

Mr. WALLACE. Yes.

Mr. QU Aid. Yes, sir; they are in the hospital now.

Mr. HAY. Do you know the character of the employees there as to age, etc? Tell us about that, will you?

Mr. QU Aid. Well, as far as I observed, the character of the employees, it is not different from that of former times. I only take that from the records of the hospital, and I see that they had quite as much difficulty in the former days, with their attendants, as they are having to-day.

Mr. HAY. As to age; what is the average age of attendants employed there?

Mr. QU Aid. The hospital endeavors to secure men between the ages of 21 and 35 years. One object in that is to have young material at hand to enter the higher course of attendant duty—that is, the training school. The hospital has made that a most attractive position, as regards its payroll, and the effort is made to have those young people enter the training school and become trained nurses.

Mr. HAY. How many, on an average, enter the training school?

Mr. QU Aid. I think we had a class of sixty at the start.

Mr. HAY. When was that training school inaugurated?

Mr. QU Aid. The training school was inaugurated under Dr. Richardson?

Mr. HAY. And you have how many in the training school now?

Mr. QUAID. I do not know the exact number. There are two classes, the junior class and the senior class. The senior class is the graduating class, and it will graduate this month.

Mr. HAY. How many of them are there in that class?

Mr. QUAID. I have no idea.

Mr. HAY. Who has charge of the training school?

Mr. QUAID. The head nurse.

Mr. HAY. Who is the head nurse?

Mr. QUAID. Miss Tanguary.

Mr. BARCHFELD. How many attendants have you at the institution, all told?

Mr. QUAID. They have, all told, to-day, about three hundred attendants.

Mr. BARCHFELD. Male and female?

Mr. QUAID. Male and female.

Mr. BARCHFELD. And how many nurses?

Mr. QUAID. I have included those, but I can give you the nurses. We have 29 female trained nurses and 23 male nurses.

Mr. BARCHFELD. Both of those classes are graduates?

Mr. QUAID. They are all graduate nurses.

Mr. BARCHFELD. You say you pay the graduate nurses a higher rate of wage?

Mr. QUAID. Yes, sir. A graduate male nurse is paid a maximum of \$40 a month, in charge positions. The female charge nurses receive \$35 per month. Both of those amounts represent an increase of \$5 over the scale of wages as found in effect by Dr. White.

Mr. BARCHFELD. Do you know anything about the amount of money, as clerk, that Congress appropriates for the maintenance of your institution?

Mr. QUAID. No, sir; I have no direct relation to that.

Mr. BARCHFELD. You certify all your vouchers to the Secretary of the Interior?

Mr. QUAID. That comes through the financial office. I understand that is done, but I personally have nothing to do with it.

Mr. HAY. Do you know anything about the inmates that are required to perform services there? Does that come under your observation?

Mr. QUAID. It does not come under my office; no, sir.

Mr. BARCHFELD. You have patients over there at work?

Mr. QUAID. Yes, sir; inmates and patients at work.

Mr. BARCHFELD. It is considered that it is beneficial to their welfare that they should do so?

Mr. QUAID. That is so, I understand.

Mr. BARCHFELD. And that is done all over the United States and all over the world in all institutions of that kind; they all put the patients to work?

Mr. QUAID. Yes, sir.

Mr. HAY. It depends on who they are, I suppose.

Mr. QUAID. Yes. We have, for instance, some five attendants in charge of working patients on the grounds.

Mr. HAY. With reference to this training school, you say you do not know how many there are in the school?

Mr. QUAID. I do not know how many are in the class; no, sir.

Mr. HAY. Have you any idea about it at all?

Mr. QUAID. I should say probably a dozen will graduate this month—probably twelve.

Mr. HAY. How many are there in the junior class?

Mr. QUAID. I have not the least idea. That is a matter that does not come directly under me.

Mr. HAY. Do you know anything about the appropriation; how it is carried in the appropriation bill?

Mr. QUAID. Nothing whatever.

Mr. HAY. You do not?

Mr. QUAID. No, sir.

The ACTING CHAIRMAN. If you know, Mr. Quaid, you may state the number of attendants now as compared with the former management of the institution.

Mr. QUAID. There is an increase in the number of attendants now as compared with the former management of the institution.

Mr. HAY. How many were employed when you first went there?

Mr. QUAID. When I first went there—well, I couldn't answer that.

Mr. HAY. How many are employed now?

Mr. QUAID. We have now 300; possibly a little over.

Mr. HAY. If you can not tell how many there were when you went there—

Mr. QUAID. I will say this: That I made out a report for Doctor White when he assumed charge of the hospital, classifying every person in the institution according to their duties. That report I have here, and I think it shows a total number of attendants and nurses of about 291.

Mr. SMYSER. How many patients did you have, though, at that time?

Mr. QUAID. I can not answer that.

Mr. SMYSER. So that there may not be as many attendants there now in proportion to the patients as there were then?

Mr. QUAID. The proportion of attendants now to the patients will be about one to eight and a fraction. We have about 2,550 patients.

Mr. SMYSER. It varies, of course, from day to day, I suppose?

Mr. QUAID. Yes, sir.

Mr. SMYSER. Or from week to week?

Mr. QUAID. Yes.

Mr. HAY. Do you, in those 300, include everybody?

Mr. QUAID. Everybody.

Mr. HAY. Do you include the physicians?

Mr. QUAID. Oh, no; not the physicians.

Mr. HAY. The clerks?

Mr. QUAID. No. I include the supervisors, nurses, attendants, and a number of nurses or dining-room attendants, known as domestics, serving in various buildings, who relieve the regular attendants of certain duties.

Mr. HAY. Do you include in the 300 those who are employed in the laundry?

Mr. QUAID. No, sir; our total force of employees runs up to about 690.

Mr. HAY. Six hundred and ninety?

Mr. QUAID. Yes, sir.

Mr. HAY. That includes the farm hands?

Mr. QUAID. It includes everyone; the superintendent and everybody.

Mr. WALLACE. That includes the gate watchmen and all?

Mr. QUAID. Yes; everybody.

Mr. HAY. The superintendent and everybody?

Mr. QUAID. Yes, sir.

Mr. WALLACE. Is the gate watchman carried as an attendant on the role?

Mr. QUAID. No, sir; he was carried as an attendant until the present superintendent took charge. He began a reclassification of the pay-roll, and since that time the gateman's position has been classified as a gateman, at a stated salary.

Mr. SMYSER. How long have you been at that reclassification of the pay roll?

Mr. QUAID. We have been engaged at that reclassification of the pay roll for fully two years, I should say, at different times. We have not made it a steady job at all, but have taken it up possibly month after month, and beaten it into shape, until we now have a fairly presentable pay roll of some 100 classifications. There has been a general betterment. The effort has been to make a general betterment of the wage throughout the institution. There has been, for instance, in the attendants' and nurses' school, over what Doctor White found it, an increase of about \$5 per month in each line—over the maximum as he found it, and throughout the domestic department, the laundry, and the engineer's department, there has been an effort made to increase the wage.

Mr. HAY. When was the last increase in pay made, of supervisors?

Mr. QUAID. The last increase in the pay of supervisors went into effect April 1, 1906.

Mr. HAY. How much was that increase?

Mr. QUAID. It was an increase of \$10 a month over the previous maximum amount, which was \$50. It is now \$60.

The CHAIRMAN. If you know anything more that you think would aid us in this investigation, let us know about it.

Mr. QUAID. I would be very pleased to do so, sir, if I had the information that you wished. I hardly know how to speak in a general way on that subject.

The ACTING CHAIRMAN. Generally, from what you have observed and have knowledge of, how does the management of the institution to-day compare with its management under Doctor Richardson, say?

Mr. QUAID. I think the management to-day compares favorably with Doctor Richardson's management. I could not think otherwise. I think there is a more compact, cohesive system in operation throughout the institution. The classification of the pay roll alone did away with a world of worry and annoyance. Individual demands have practically ceased, and like work is being paid for in like sums. That alone is worth something.

The CHAIRMAN. And as to the treatment of the patients, what have you to say?

Mr. QUAID. As to the treatment of patients, all I can say is that I have observed these new buildings and have visited them with the physicians at times, and I only see what is modern in there. That is all I can say about that.

Mr. HAY. Your duties do not bring you in contact much with the patients?

Mr. QUAID. No, sir.

The ACTING CHAIRMAN. How frequently did the board of visitors get over there?

Mr. QUAID. The regulations, I think, prescribe a meeting of the board of visitors once a month.

The ACTING CHAIRMAN. I do not care anything about that.

Mr. QUAID. Well, they go there once a month. I have seen them there.

The ACTING CHAIRMAN. How long do they stay?

Mr. QUAID. Probably I have seen them drive up there at 1 o'clock in the afternoon, and I have seen them in the administration building about 3 or 3.30 o'clock.

Mr. HAY. Then they would leave at 3.30 o'clock?

Mr. QUAID. As far as I know. I do not say positively that they left at 3.30 o'clock. I have seen them in the administration hall at that time. They disappeared from my view—from my office.

The ACTING CHAIRMAN. Would they only be in the administration building during that time?

Mr. QUAID. Would they only be in the administration building? No, sir; they would come to the administration building from some other quarter. The board does not meet in the new administration building.

The ACTING CHAIRMAN. I want to find out if it met at all.

Mr. QUAID. I have never been present at any meeting.

Mr. HAY. You have never been present at any meeting?

Mr. QUAID. No, sir.

Mr. HAY. Your duties do not require you to be present?

Mr. QUAID. No, sir; they do not. They require my presence merely in the administration building.

Mr. HAY. The names of these three hundred employees that you speak of you have, I suppose.

Mr. QUAID. Yes, sir; I have them right here.

Mr. HAY. You say you have them with you?

Mr. QUAID. Yes, sir.

The ACTING CHAIRMAN. Have you that list in such shape that you can leave it here?

Mr. QUAID. Yes, sir; it is in such shape that it can be left here now. Here is the pay roll as classified for Dr. White when he took charge. I have also with me the pay roll as it is at present classified.

Mr. HAY. Let him give those lists to the stenographer to be put in the record.

The ACTING CHAIRMAN. Very well; hand them to the stenographer.

The lists of employees above referred to are as follows:

Pay roll as classified for Doctor White when he took charge of the institution.

Name, William A. White. Pay roll designation, superintendent; designation by actual work, superintendent; where employed, institution; compensation, \$333.33.

Maurice J. Stack. Pay roll designation, assistant physician; designation by actual work, first assistant physician; where employed, West Side department; compensation, \$191.66.

John C. Simpson. Pay roll designation, assistant physician; designation by actual work, second assistant physician; where employed, Allison and detached; compensation, \$183.33.

Charles H. Clark. Pay roll designation, assistant physician; designation by actual work, third assistant physician; where employed, East Side department; compensation, \$125.

Benjamin R. Logie. Pay roll designation, assistant physician; designation by actual work, fourth assistant physician; where employed, Toner and Oaks; compensation, \$116.16.

John E. Toner. Pay roll designation, assistant physician; designation by actual work, fifth assistant physician; where employed, Howard Hall department; compensation, \$100.

George H. Schwinn, jr. Pay roll designation, junior assistant physician; designation by actual work, night medical officer; where employed, institution; compensation, \$83.33.

Harry R. Hummer. Pay roll designation, junior assistant physician; designation by actual work, junior assistant physician; where employed, West Side department; compensation, \$75.

I. W. Blackburn. Pay roll designation, pathologist; designation by actual work, pathologist; where employed, morgue; compensation, \$166.66.

Cornelius DeWeese. Pay roll designation, clinical interne; designation by actual work, clinical assistant to same; where employed, morgue; compensation, \$75.

Paul Freeman. Pay roll designation, clinical interne; designation by actual work, medical interne; where employed, East Side department; compensation, \$50.

Frank R. Webb. Pay roll designation, clinical interne; designation by actual work, medical interne; where employed, Toner and Oaks; compensation, \$50.

Alfred Glascock. Pay roll designation, clinical interne; designation by actual work, medical interne; where employed, detached buildings; compensation, \$50.

Lewis H. Taylor. Pay roll designation, clinical interne; designation by actual work, medical interne; where employed, Howard Hall department; compensation, \$50.

A. D. Weakley. Pay roll designation, dentist; designation by actual work, dentist (visiting); where employed, institution; compensation, \$8 per day.

A. E. Offutt. Pay roll designation, purchasing agent; designation by actual work, purchasing agent; compensation, \$100.

Alice M. Hardy. Pay roll designation, chief clerk; designation by actual work, chief clerk; where employed, general office; compensation, \$100.

Frank M. Finotti. Pay roll designation, clerk; designation by actual work, clerk; where employed, physicians' office; compensation, \$70.

William H. Haydn. Pay roll designation, clerk; designation by actual work, clerk; where employed, physicians' office; compensation, \$60.

William Cross. Pay roll designation, clerk; designation by actual work, clerk; where employed, general office; compensation, \$65.

Julia E. Hardy. Pay roll designation, attendant; designation by actual work, clerk; where employed, general office; compensation, \$55.

William L. Quaid. Pay roll designation, attendant; designation by actual work, clerk, and secretary civil service board; where employed, office; compensation, \$30.

Charles Green. Pay roll designation, messenger; designation by actual work, clerk; where employed, general office; compensation, \$60.

Sue Meloy. Pay roll designation, stenographer; designation by actual work, clerk, and secretary to superintendent; where employed, office; compensation, \$60.

William M. Keeler. Pay roll designation, photographer; designation by actual work, photographer; where employed, morgue; compensation, \$40.

Richard Bennett. Pay roll designation, druggist; designation by actual work, pharmacist; where employed, dispensary; compensation, \$79.16.

Rosina T. Sullivan. Pay roll designation, 'phone operator; designation by actual work, 'phone operator and postmistress; where employed, Center Building; compensation, \$20.

Emily L. Martin. Pay roll designation, 'phone operator; designation by actual work, 'phone operator and assistant; where employed, Center Building; compensation, \$20.

Katherine E. Cramer. Pay roll designation, superintendent training school;

designation by actual work, chief of training school; where employed, training school; compensation, \$75.

Ethel McClanahan. Pay roll designation, chief nurse; designation by actual work, chief nurse; where employed, west side; compensation, \$50.

Frona M. Matthews. Pay roll designation, chief nurse; designation by actual work, chief nurse; where employed, Toner and Oaks department; compensation, \$50.

Helene Tanquary. Pay roll designation, chief nurse; designation by actual work, chief nurse; where employed, east side; compensation, \$45.

George E. Coomes. Pay roll designation, supervisor; designation by actual work, chief supervisor; where employed, west side; compensation, \$53.33.

James E. Toner. Pay roll designation, supervisor; designation by actual work, chief supervisor; where employed, Allison and detached; compensation, \$53.33.

Patrick Doody. Pay roll designation, supervisor; designation by actual work, chief supervisor; where employed, Howard Hall department; compensation, \$50.

James S. Carter. Pay roll designation, supervisor; designation by actual work, chief supervisor; where employed, Toner and Oaks department; compensation, \$53.33.

Mrs. Honoro O'Brien. Pay roll designation, supervisor; designation by actual work, female chief supervisor; where employed, East Side; compensation, \$50.

Charles J. Burch. Pay roll designation, supervisor; designation by actual work, male assistant supervisor; where employed, West Side; compensation, \$50.

Patrick T. Moloney. Pay roll designation, supervisor; designation by actual work, male assistant supervisor; where employed, West Side; compensation, \$50.

Benjamin N. Estep. Pay roll designation, supervisor; designation by actual work, male assistant supervisor; where employed, Allison and Detached; compensation, \$40.

Clarence T. Carter. Pay roll designation, supervisor; designation by actual work, male assistant supervisor; where employed, Allison and detached; compensation, \$45.

Armistead Williams. Pay roll designation, supervisor; designation by actual work, male assistant supervisor; where employed, Howard Hall department; compensation, \$50.

J. A. Millard. Pay roll designation, attendant; designation by actual work, male assistant supervisor; where employed, Howard Hall department; compensation, \$37.50.

J. E. Bowers. Pay roll designation, attendant; designation by actual work, male assistant supervisor (also douche room); where employed, Toner and Oaks department; compensation, \$40.

Ruth M. Swann. Pay roll designation, attendant; designation by actual work, female assistant to chief supervisor; also clothing marker; where employed, East Side; compensation, \$30.

James H. Goddard, jr. Pay roll designation, attendant; designation by actual work, charge nurse; where employed, West Side; compensation, \$37.50.

J. H. Lloyd. Pay roll designation, attendant; designation by actual work, charge nurse; where employed, West Side; compensation, \$37.50.

Emil W. Hood. Pay roll designation, attendant; designation by actual work, charge nurse; where employed, West Side; compensation, \$35.

Philip J. Martin. Pay roll designation, attendant; designation by actual work, charge nurse; where employed, West Side; compensation, \$35.

Harry R. Knott. Pay roll designation, attendant; designation by actual work, charge nurse; where employed, Allison and Detached; compensation, \$37.50.

W. T. Chinn. Pay roll designation, attendant; designation by actual work, charge nurse; where employed, Howard Hall department; compensation, \$37.50.

R. R. Hogan. Pay roll designation, attendant; designation by actual work, charge nurse; where employed, Howard Hall department; compensation, \$35.

C. J. Harbaugh. Pay roll designation, attendant; designation by actual work, charge nurse; where employed, Howard Hall department; compensation, \$37.50.

Alpheus L. Walter. Pay roll designation, attendant; designation by actual work, charge nurse; where employed, Toner and Oaks department; compensation, \$37.50.

Stephen S. Perry. Pay roll designation, attendant; designation by actual

work, charge nurse; where employed, Toner and Oaks department; compensation, \$37.50.

J. W. James. Pay roll designation, attendant; designation by actual work, charge nurse; where employed, Toner and Oaks department; compensation, \$37.50.

Arthur S. Nabors. Pay roll designation, attendant; designation by actual work, charge nurse; where employed, Toner and Oaks department; compensation, \$35.

Florence Davis. Pay roll designation, attendant; designation by actual work, attendant, second year training; where employed, East Side; compensation, \$22.50.

Maggie Hogan. Pay roll designation, attendant; designation by actual work, night attendant, second year training; where employed, East side; compensation, \$20.

Mary Edwards. Pay roll designation, attendant; designation by actual work, night attendant, second year training; where employed, East Side; compensation, \$18.

Maggie Fitzpatrick. Pay roll designation, attendant; designation by actual work, night attendant, second year training; where employed, East Side; compensation, \$20.

Lottie Nabors. Pay roll designation, attendant; designation by actual work, night attendant, second year training; where employed East Side; compensation, \$20.

Matthew Yingling. Pay roll designation, attendant; designation by actual work, attendant, first year training; where employed, West Side; compensation, \$20.

H. H. Gawen. Pay roll designation, attendant; designation by actual work, attendant, first year training; where employed, West Side; compensation, \$25.

W. H. Ford. Pay roll designation, attendant; designation by actual work, attendant, first year training; where employed, West Side; compensation, \$30.

William W. Carey. Pay roll designation, attendant; designation by actual work, attendant, first year training; where employed, Howard Hall department; compensation, \$20.

Benson Taylor. Pay roll designation, attendant; designation by actual work, attendant; first year training; where employed, Howard Hall department; compensation, \$20.

Edward C. Shipley. Pay roll designation, attendant; designation by actual work, attendant, first year training; where employed, Allison and detached; compensation, \$20.

James R. Stringfellow. Pay roll designation, attendant; designation by actual work, attendant, first year training; where employed, Toner and Oaks department; compensation, \$20.

J. L. Waters. Pay roll designation, attendant; designation by actual work, attendant, first year training; where employed, Toner and Oaks department; compensation \$27.50.

J. H. B. Swain. Pay roll designation, attendant; designation by actual work, attendant, first year training; where employed, Toner and Oaks department; compensation, \$22.

Edward McGovern. Pay roll designation, attendant; designation by actual work, night attendant, first year training; where employed, Allison and Detached; compensation, \$27.50.

Charles E. Tucker. Pay roll designation, attendant; designation by actual work, night attendant, first year training; where employed, Allison and Detached; compensation, \$18.

William G. Leapley. Pay roll designation, attendant; designation by actual work, night attendant, first year training; where employed, Allison and Detached; compensation, \$20.

Magill Readmond. Pay roll designation, attendant; designation by actual work, night attendant, first year training; where employed, Toner and Oaks department; compensation, \$20.

Dora Dorman. Pay roll designation, attendant; designation by actual work, attendant, first year training; where employed, Allison and Detached; compensation, \$16.

Lillian E. Jenkinson. Pay roll designation, attendant; designation by actual work, attendant, first year training; where employed, East Side; compensation, \$18.

Lutie Hoy. Pay roll designation, attendant; designation by actual work, attendant, first year training; where employed, East Side; compensation, \$18.

Leah Jenkins. Pay roll designation, attendant; designation by actual work, attendant, first year training (special duty); where employed, East Side; compensation, \$14.

Mary Martin. Pay roll designation, attendant; designation by actual work, attendant, first year training; where employed, East Side; compensation, \$14.

Frances Conrad. Pay roll designation, attendant; designation by actual work, attendant, first year training; where employed, East Side; compensation, \$18.

Matilda Roland. Pay roll designation, attendant; designation by actual work, attendant, first year training; where employed, East Side; compensation, \$14.

Lottie McWelch. Pay roll designation, attendant; designation by actual work, attendant, first year training; where employed, East Side; compensation, \$14.

Minnie Cox. Pay roll designation, attendant; designation by actual work, attendant, first year training; where employed, East Side; compensation, \$20.

Dallie C. Jones. Pay roll designation, attendant; designation by actual work, charge nurse; where employed, Toner and Oaks department; compensation, \$35.

John F. Jenkins. Pay roll designation, attendant; designation by actual work, charge night nurse; where employed, Toner and Oaks department; compensation, \$37.50.

Frank N. Shreve. Pay roll designation, attendant; designation by actual work, charge night nurse; where employed, Toner and Oaks department; compensation, \$35.

Augusta A. Noebe. Pay roll designation, attendant; designation by actual work, charge nurse; where employed, Allison and Detached buildings; compensation, \$32.50.

Ida Edelin. Pay roll designation, attendant; designation by actual work, charge nurse; where employed, Allison and Detached buildings; compensation, \$32.50.

Emma N. Butler. Pay roll designation, attendant; designation by actual work, charge nurse; where employed, East Side; compensation, \$30.

Lulu Swann. Pay roll designation, attendant; designation by actual work, charge nurse; where employed, East Side; compensation, \$30.

Beatrice Swann. Pay roll designation, attendant; designation by actual work, charge nurse; where employed, East Side; compensation, \$30.

Margaret Willett. Pay roll designation, attendant; designation by actual work, charge nurse; where employed, East Side; compensation, \$30.

Jessie Ferrall. Pay roll designation, attendant; designation by actual work, charge nurse; where employed, East Side; compensation, \$30.

Ethel Sutherland. Pay roll designation, attendant; designation by actual work, charge nurse; where employed, East Side; compensation, \$30.

Attie O. Wilson. Pay roll designation, attendant; designation by actual work, charge nurse; where employed, East Side; compensation, \$30.

Mary Roche. Pay roll designation, attendant; designation by actual work, charge nurse; where employed, East Side; compensation, \$30.

Blanche Morrison. Pay roll designation, attendant; designation by actual work, charge nurse; where employed, East Side; compensation, \$30.

Lillie Thorue. Pay roll designation, attendant; designation by actual work, charge nurse; where employed, East Side; compensation, \$30.

Rose Herbert. Pay roll designation, attendant; designation by actual work, charge nurse; where employed, East Side; compensation, \$30.

Katie Tudge. Pay roll designation, attendant; designation by actual work, charge nurse; where employed, East Side; compensation, \$30.

Minnie Sutherland. Pay roll designation, attendant; designation by actual work, charge night nurse; where employed, East Side; compensation, \$32.50.

Ora Omohundro. Pay roll designation, attendant; designation by actual work, charge night nurse; where employed, Allison and detached buildings; compensation, \$32.50.

Hattie Allen. Pay roll designation, attendant; designation by actual work, charge night nurse; where employed, Allison and Detached buildings; compensation, \$32.50.

Clark W. Teats. Pay roll designation, attendant; designation by actual work, nurse; where employed, West Side; compensation, \$37.50.

Edgar A. Jarrett. Pay roll designation, attendant; designation by actual work, nurse; where employed, Toner and Oaks department; compensation, \$22.50.

Timothy Hanlon. Pay roll designation, attendant; designation by actual work, nurse; where employed, Toner and Oaks department; compensation, \$30.

M. K. Humphries. Pay roll designation, attendant; designation by actual work, nurse; where employed, Toner and Oaks department; compensation, \$30.

Frank Beinn. Pay roll designation, attendant; designation by actual work, nurse (special duty); where employed, Toner and Oaks department; compensation, \$37.50.

V. K. Thompson. Pay roll designation, attendant; designation by actual work, nurse (douche room); where employed, Toner and Oaks department; compensation, \$35.

Lee W. Courtney. Pay roll designation, attendant; designation by actual work, nurse (attendant's duty); where employed, Toner and Oaks department; compensation, \$35.

George W. Jones. Pay roll designation, attendant; designation by actual work, night nurse; where employed, west side; compensation, \$35.

Charles W. Sult. Pay roll designation, attendant; designation by actual work, night nurse; where employed, Howard Hall department; compensation, \$35.

R. F. Tobin. Pay roll designation, attendant; designation by actual work, night nurse; where employed, Howard Hall department; compensation, \$35.

Mary McLaughlin. Pay roll designation, attendant; designation by actual work, nurse; where employed, West Side; compensation, \$32.50.

Mamie Perry. Pay roll designation, attendant; designation by actual work, nurse; where employed, West Side; compensation, \$30.

Ida Oliver. Pay roll designation, attendant; designation by actual work, nurse; where employed, Howard Hall department; compensation \$32.50.

Ethel Finotti. Pay roll designation, attendant; designation by actual work, nurse; where employed, Howard Hall department; compensation, \$32.50.

Elizabeth Fitzpatrick. Pay roll designation, attendant; designation by actual work, nurse; where employed, Howard Hall department; compensation, \$32.50.

Carolyn Casteel. Pay roll designation, attendant; designation by actual work, nurse; where employed, Toner and Oaks department; compensation, \$32.50.

Lucy Watson. Pay roll designation, attendant; designation by actual work, night nurse; where employed, East Side; compensation, \$30.

Helen Vivian. Pay roll designation, attendant; designation by actual work, night nurse; where employed, East Side; compensation, \$30.

Dora Jones. Pay roll designation, attendant; designation by actual work, night nurse; where employed, East Side; compensation, \$30.

Pauline Hildebrand. Pay roll designation, attendant; designation by actual work, night nurse; where employed, East Side; compensation, \$27.50.

G. B. Thorne. Pay roll designation, attendant; designation by actual work, attendant, second-year training; where employed, West Side; compensation, \$30.

Curry E. Thrift. Pay roll designation, attendant; designation by actual work, attendant, second-year training; where employed, West Side; compensation, \$25.

George M. Popham. Pay roll designation, attendant; designation by actual work, attendant, second year training; where employed, Allison and Detached; compensation, \$22.

W. B. Treacle. Pay roll designation, attendant; designation by actual work, attendant, second year training; where employed, Toner and Oaks department; compensation, \$25.

R. N. Spicer. Pay roll designation, attendant; designation by actual work, night attendant, second year training; where employed, Howard Hall Department; compensation, \$25.

T. K. Conrad. Pay roll designation, attendant; designation by actual work, night attendant, second year training; where employed, Allison and Detached; compensation, \$22.50.

Laurelia Laws. Pay roll designation, attendant; designation by actual work, attendant, second year training; where employed, Allison and Detached; compensation, \$22.50.

Julia E. Neill. Pay roll designation, attendant; designation by actual work, attendant, second year training; where employed, Allison and Detached; compensation, \$20.

Mary V. Himes. Pay roll designation, attendant; designation by actual work, attendant, second year training; where employed, Allison and Detached; compensation, \$22.50.

Mary Crawford. Pay roll designation, attendant; designation by actual work, attendant, second year training; where employed, East Side; compensation, \$18.

Rosie King. Pay roll designation, attendant; designation by actual work, attendant, second year training; where employed, East Side; compensation, \$20.

Eva Helm. Pay roll designation, attendant; designation by actual work, attendant, second year training; where employed, East Side; compensation, \$20.

Mary Mack. Pay roll designation, attendant; designation by actual work, attendant, second year training; where employed, East Side; compensation, \$20.

Nellie Peacock. Pay roll designation, attendant; designation by actual work, attendant; where employed, East Side; compensation, \$25.

Cynthia A. French. Pay roll designation, attendant; designation by actual work, attendant; where employed, West Side; compensation, \$25.

George W. Shoemaker, jr. Pay roll designation, attendant; designation by actual work, probationary attendant, first year training; where employed, West Side; compensation, \$18.

Benson H. Allen. Pay roll designation, attendant; designation by actual work, probationary attendant; where employed, West Side; compensation, \$18.

Thos. D. Ford. Pay roll designation, attendant; designation by actual work, probationary attendant; where employed, West Side; compensation, \$18.

James Crigler. Pay roll designation, attendant; designation by actual work, probationary attendant; where employed, West Side; compensation, \$18.

Tryman S. Jones. Pay roll designation, attendant; designation by actual work, probationary attendant; where employed, West Side; compensation, \$18.

Pinkney E. Hall. Pay roll designation, attendant; designation by actual work, probationary attendant; where employed, West Side; compensation, \$18.

William C. Bryan. Pay roll designation, attendant; designation by actual work, probationary attendant; where employed, West Side; compensation, \$18.

William S. Thrall. Pay roll designation, attendant; designation by actual work, probationary attendant; where employed, West Side; compensation, \$18.

C. H. Bieksler. Pay roll designation, attendant; designation by actual work, probationary attendant; where employed, West Side; compensation, \$18.

Ernest M. Clatterbuck. Pay roll designation, attendant; designation by actual work, probationary attendant; where employed, West Side; compensation, \$18.

C. R. Willett. Pay roll designation, attendant; designation by actual work, probationary attendant; where employed, Allison and Detached; compensation, \$18.

M. C. A. Gray. Pay roll designation, attendant; designation by actual work, probationary attendant; where employed, Allison and Detached; compensation, \$18.

Andrew J. Price. Pay roll designation, attendant; designation by actual work, probationary attendant; where employed, Allison and Detached; compensation, \$18.

A. B. Peaper. Pay roll designation, attendant; designation by actual work, probationary attendant; where employed, Allison and Detached; compensation, \$18.

Vassie G. Strickler. Pay roll designation, attendant; designation by actual work, probationary attendant; where employed, Allison and Detached; compensation, \$18.

T. Roy McDaniel. Pay roll designation, attendant; designation by actual work, probationary attendant; where employed, Allison and Detached; compensation, \$18.

Sherwood C. Keys. Pay roll designation, attendant; designation by actual work, probationary attendant; where employed, Howard Hall department; compensation, \$18.

Dennis J. Donohue. Pay roll designation, attendant; designation by actual

work, probationary attendant; where employed, Howard Hall department; compensation, \$18.

J. W. Allen. Pay roll designation, attendant; designation by actual work, probationary attendant; where employed, Howard Hall department; compensation, \$18.

Zachariah T. Soper. Pay roll designation, attendant; designation by actual work, probationary attendant; where employed, Howard Hall department; compensation, \$18.

Matthew S. Davis. Pay roll designation, attendant; designation by actual work, probationary attendant; where employed, Howard Hall department; compensation, \$18.

Clark M. Boswell. Pay roll designation, attendant; designation by actual work, probationary attendant; where employed, Howard Hall department; compensation, \$18.

French A. Emmons. Pay roll designation, attendant; designation by actual work, probationary attendant, first year training; where employed, Howard Hall department; compensation, \$18.

Marshel B. Harbaugh. Pay roll designation, attendant; designation by actual work, probationary attendant, first year training; where employed, Howard Hall department; compensation, \$18.

R. A. Gibbons. Pay roll designation, attendant; designation by actual work, probationary night attendant; where employed, Allison and Detached; compensation, \$18.

Norvell E. Richards. Pay roll designation, attendant; designation by actual work, probationary night attendant; where employed, Allison and Detached; compensation, \$18.

W. E. Smith. Pay roll designation, attendant; designation by actual work, dining room attendant; where employed, Howard Hall department; compensation, \$30.

A. E. Blackiston. Pay roll designation, attendant; designation by actual work, dining room attendant; where employed, Howard Hall department; compensation, \$30.

B. W. Reid. Pay roll designation, attendant; designation by actual work, dining room attendant; where employed, Howard Hall department; compensation, \$30.

Bernard Roche. Pay roll designation, attendant; designation by actual work, dining room attendant; where employed, Howard Hall department; compensation, \$25.

John D. Lowe. Pay roll designation, attendant; designation by actual work, dining room attendant (probationer); where employed, Allison and Detached; compensation, \$18.

Edward L. Clark. Pay roll designation, attendant; designation by actual work, special policeman; where employed, ———; compensation, \$37.50.

Joseph D. Sullivan. Pay roll designation, attendant; designation by actual work, dental work; compensation, \$30.

J. L. Chappellear. Pay roll designation, attendant; designation by actual work, barber; where employed, West Side; compensation, \$35.

T. H. Rawling. Pay roll designation, attendant; designation by actual work, charge barber; where employed, Allison and Detached; compensation \$35.

J. W. Conrad. Pay roll designation, attendant; designation by actual work, barber; where employed, Allison and Detached; compensation, \$35.

J. W. Blaine. Pay roll designation, attendant; designation by actual work, barber; where employed, Allison and Detached; compensation, \$35.

J. I. Cusick. Pay roll designation, attendant; designation by actual work, barber; where employed, Howard Hall department; compensation, \$35.

T. N. Burroughs. Pay roll designation, attendant; designation by actual work, barber; where employed, Toner and Oaks department; compensation, \$35.

J. S. Edelin. Pay roll designation, attendant; designation by actual work, printer; where employed, office West Side; compensation, \$35.

J. M. England. Pay roll designation, attendant; designation by actual work, mattress maker; where employed, mattress shop; compensation, \$40.

William H. Bonini. Pay roll designation, attendant; designation by actual work, upholsterer; where employed, ———; compensation, \$40.

W. T. Queen. Pay roll designation, attendant; designation by actual work, lawns; where employed, Allison and Detached; compensation, \$35.

W. H. Sears. Pay roll designation, attendant; designation by actual work, lawns and basements; where employed, Toner and Oaks department; compensation, \$32.50.

Edgar Demar. Pay roll designation, laborer; designation by actual work, assistant on lawns and basements; where employed, Toner and Oaks department; compensation \$16.

James H. Dixon. Pay roll designation, gateman; designation by actual work, gatekeeper; where employed, main entrance; compensation, \$35.

George W. Downing. Pay roll designation, gateman; designation by actual work, gatekeeper; where employed, upper entrance; compensation, \$35.

William D. Barry, jr. Pay roll designation, attendant; designation by actual work, probationary night attendant; where employed, Allison and Detached; compensation, \$18.

Nellie Butler. Pay roll designation, attendant; designation by actual work, probationary attendant, first-year training; where employed, East Side; compensation, \$14.

Julia B. Smith. Pay roll designation, attendant; designation by actual work, probationary attendant, first-year training; where employed, East Side; compensation, \$14.

Bertha Roth. Pay roll designation, attendant; designation by actual work, probationary attendant, first-year training; where employed, East Side; compensation, \$14.

Alice Jones. Pay roll designation, attendant; designation by actual work, probationary attendant, first-year training; where employed, East Side; compensation, \$14.

Kate Byram. Pay roll designation, attendant; designation by actual work, probationary attendant, first-year training; where employed, East Side; compensation, \$14.

Nora Kane. Pay roll designation, attendant; designation by actual work, probationary attendant, first-year training; where employed, East Side; compensation, \$14.

Ida Jones. Pay roll designation, attendant; designation by actual work, probationary attendant, first-year training; where employed, East Side; compensation, \$14.

Juniata Sanzio. Pay roll designation, attendant; designation by actual work, probationary attendant, first-year training; where employed, East Side; compensation, \$14.

Daisy Bowman. Pay roll designation, attendant; designation by actual work, probationary attendant, first-year training; where employed, East Side; compensation, \$14.

Nellie Casteel. Pay roll designation, attendant; designation by actual work, probationary night attendant; where employed, East Side; compensation, \$14.

Marion Bond. Pay roll designation, attendant; designation by actual work, probationary attendant, first-year training; where employed, East Side; compensation, \$14.

B. F. Mangold. Pay roll designation, attendant; designation by actual work, special attendant; where employed, Toner and Oaks; compensation, \$30.

Frank E. Tennyson. Pay roll designation, attendant; designation by actual work, special attendant; where employed, Toner and Oaks; compensation, \$30.

Marie Murphy. Pay roll designation, attendant; designation by actual work, charge Borrows Cottage; where employed, Detached Cottage; compensation, \$30.

Patrick Barrett. Pay roll designation, attendant; designation by actual work, night watch; where employed, outside; compensation, \$45.

Thomas B. Corbin. Pay roll designation, attendant; designation by actual work, night watch; where employed, West Side (inside); compensation, \$40.

W. G. Flowers. Pay roll designation, attendant; designation by actual work, night watch; where employed, Allison and Detached; compensation, \$37.50.

John Hodges. Pay roll designation, attendant; designation by actual work, night watch; where employed, Howard Hall department; compensation, \$40.

Henry Simms (colored). Pay roll designation, attendant; designation by actual work, night watch, stable; where employed, stable; compensation, \$30.

W. D. Staples. Pay roll designation, laborer; designation by actual work, night watch, barns; where employed, barns; compensation, \$30.

Mary Wathen. Pay roll designation, laborer; designation by actual work, night watch; where employed, East Side; compensation, \$30.

Maggie Fleming. Pay roll designation, laborer; designation by actual work, night watch; where employed, East Side; compensation, \$25.

Mary Klug. Pay roll designation, laborer; designation by actual work, night watch; where employed, East Side; compensation, \$25.

Genevieve Herbert. Pay roll designation, attendant; designation by actual work, attendant, first-year training; where employed, East Side; compensation, \$14.

Myrtle Rollins. Pay roll designation, attendant; designation by actual work, night attendant, first-year training; where employed, East Side; compensation, \$20.

L. R. Waters. Pay roll designation, attendant; designation by actual work, charge attendant, second-year training; where employed, Allison and Detached; compensation, \$30.

T. H. Medley. Pay roll designation, attendant; designation by actual work, charge attendant, second-year training; where employed, Allison and Detached; compensation, \$30.

H. M. Foley. Pay roll designation, attendant; designation by actual work, charge attendant, second-year training; where employed, Howard Hall department; compensation, \$22.50.

A. Stewart. Pay roll designation, attendant; designation by actual work, charge attendant, second-year training; where employed, Howard Hall department; compensation, \$25.

C. R. Brown. Pay roll designation, attendant; designation by actual work, charge attendant, second-year training; where employed, Howard Hall department; compensation, \$35.

Clara Gates. Pay roll designation, attendant; designation by actual work, charge attendant, second-year training; where employed, East Side; compensation, \$25.

Maud Griffith. Pay roll designation, attendant; designation by actual work, charge attendant, second year training; where employed, East Side; compensation, \$20.

J. H. C. Taylor. Pay roll designation, attendant; designation by actual work, charge attendant, first year training; where employed, Howard Hall department; compensation, \$25.

C. B. Swann. Pay roll designation, attendant; designation by actual work, charge attendant, first year training; where employed, Howard Hall department; compensation, \$35.

J. B. Anderson. Pay roll designation, attendant; designation by actual work, charge attendant, first year training; where employed, Toner and Oaks departments; compensation, \$25.

J. K. Pumphrey. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, West Side; compensation, \$35.

C. P. Bicksler. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, West Side; compensation, \$35.

Roger Cullinane. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, West Side; compensation, \$35.

A. G. Snyder. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, West Side; compensation, \$27.50.

Orford French. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, West Side; compensation, \$35.

H. M. Sothoron. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, West Side; compensation, \$30.

Joseph Klug. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, West Side; compensation, \$35.

J. W. Pumphrey. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, West Side; compensation, \$35.

Thornton O. Pyles. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, West Side; compensation, \$30.

Alton A. Grimes. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, West Side; compensation, \$32.50.

William Johnson. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, Allison and Detached; compensation, \$35.

Lamon C. Davis. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, Allison and Detached; compensation, \$18.

Andrew L. Acton. Pay roll designation, attendant; designation by actual

work, charge attendant; where employed, Allison and Detached; compensation, \$20.

H. W. Swann. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, Allison and Detached; compensation, \$27.50.

J. I. Thompson. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, Allison and Detached; compensation, \$35.

W. H. Richards. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, Allison and Detached; compensation, \$27.50.

Warren E. Grimes. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, Allison and Detached; compensation, \$25.

Timothy O'Neil. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, Allison and Detached; compensation, \$27.50.

W. M. Guy. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, Allison and Detached; compensation, \$25.

H. L. Carroll. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, Allison and Detached; compensation, \$35.

Isaac Miskell. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, Allison and Detached; compensation, \$25.

Hugh Groves. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, Allison and Detached; compensation, \$20.

S. B. Mudd. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, Allison and Detached; compensation, \$35.

Wellmay Wayland. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, Allison and Detached; compensation, \$25.

Frank Chinn. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, Allison and Detached; compensation, \$30.

J. W. Price. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, Allison and Detached; compensation, \$32.50.

J. A. Dixon. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, Allison and Detached; compensation, \$35.

T. D. Thompson. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, Allison and Detached; compensation, \$18.

Norman Berry. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, Allison and Detached; compensation, \$32.50.

C. J. Taylor. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, Howard Hall department; compensation, \$35.

C. M. Lucas. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, Howard Hall department; compensation, \$35.

W. Green. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, Howard Hall department; compensation, \$32.50.

E. S. McDonald. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, Howard Hall department; compensation, \$32.50.

R. L. Browning. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, Howard Hall department; compensation, \$35.

Andrew Klug. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, Toner and Oaks department; compensation, \$35.

M. C. Porter. Pay roll designation, attendant; designation by actual work, charge attendant (douche room); where employed, Toner and Oaks department; compensation, \$37.50.

J. I. Bailey. Pay roll designation, attendant; designation by actual work, charge night attendant; where employed, Toner and Oaks department; compensation, \$35.

L. L. Francis. Pay roll designation, attendant; designation by actual work, charge night attendant; where employed, Toner and Oaks department; compensation, \$22.50.

H. W. Ensor. Pay roll designation, attendant; designation by actual work, charge night attendant; where employed, Toner and Oaks department; compensation, \$35.

Nellie Healey. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, East Side; compensation, \$25.

Mary Anderson. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, East Side; compensation, \$25.

Lizzie Whalen. Pay roll designation, attendant; designation by actual work, charge attendant; where employed, East Side; compensation, \$25.

R. C. Trueman. Pay roll designation, attendant; designation by actual work, attendant; where employed, West Side; compensation, \$25.

Willis F. Walker. Pay roll designation, attendant; designation by actual work, attendant; where employed, West Side; compensation, \$20.

Wistar Cropp. Pay roll designation, attendant; designation by actual work, attendant; where employed, West Side; compensation, \$22.50.

Mack Dulaney. Pay roll designation, attendant; designation by actual work, attendant; where employed, West Side; compensation, \$20.

T. W. Moffett. Pay roll designation, attendant; designation by actual work, attendant; where employed, West Side; compensation, \$18.

Bernard Tennison. Pay roll designation, attendant; designation by actual work, attendant; where employed, West Side; compensation, \$18.

John P. Walsh. Pay roll designation, attendant; designation by actual work, attendant; where employed, West side; compensation, \$18.

Thomas Virstein. Pay roll designation, attendant; designation by actual work, attendant; where employed, West Side; compensation, \$20.

Charles W. King. Pay roll designation, attendant; designation by actual work, attendant; where employed, West Side; compensation, \$20.

Edgar L. Donohue. Pay roll designation, attendant; designation by actual work, attendant; where employed, West Side; compensation, \$20.

Hubert Donohue. Pay roll designation, attendant; designation by actual work, attendant; where employed, West Side; compensation, \$22.50.

George W. Wheaton. Pay roll designation, attendant; designation by actual work, attendant; where employed, West Side; compensation, \$20.

Owen S. Allen. Pay roll designation, attendant; designation by actual work, attendant; where employed, West Side; compensation, \$25.

Ernest E. Day. Pay roll designation, attendant; designation by actual work, attendant; where employed, West Side; compensation, \$18.

Harry S. Carroll. Pay roll designation, attendant; designation by actual work, attendant; where employed, West Side; compensation, \$20.

Harry A. Nicholson. Pay roll designation, attendant; designation by actual work, attendant; where employed, West Side; compensation, \$25.

Clinton L. Skinner. Pay roll designation, attendant; designation by actual work, attendant; where employed, West Side; compensation, \$30.

Otis A. Wilson. Pay roll designation, attendant; designation by actual work, attendant; where employed, West Side; compensation, \$27.50.

J. M. Ferguson. Pay roll designation, attendant; designation by actual work, attendant; where employed, West Side; compensation, \$20.

C. C. Nicholson. Pay roll designation, attendant; designation by actual work, attendant; where employed, Allison and Detached; compensation, \$20.

Paul Schilke. Pay roll designation, attendant; designation by actual work, attendant (in band); where employed, Allison and Detached; compensation, \$37.50.

George L. Abell. Pay roll designation, attendant; designation by actual work, attendant; where employed, Allison and Detached; compensation, \$20.

Joseph M. Berry. Pay roll designation, attendant; designation by actual work, attendant; where employed, Allison and Detached; compensation, \$20.

Joseph Queen. Pay roll designation, attendant; designation by actual work, attendant; where employed, Allison and Detached; compensation, \$30.

Lee Frye. Pay roll designation, attendant; designation by actual work, attendant; where employed, Allison and Detached; compensation, \$18.

R. H. Canter. Pay roll designation, attendant; designation by actual work, attendant; where employed, Allison and Detached; compensation, \$22.50.

Howard Hibbert. Pay roll designation, attendant; designation by actual work, attendant; where employed, Allison and Detached; compensation, \$22.

T. Wilson. Pay roll designation, attendant; designation by actual work, attendant; where employed, Allison and Detached; compensation, \$27.50.

William T. Green, jr. Pay roll designation, attendant; designation by actual work, attendant; where employed, Howard Hall department; compensation, \$20.

Ignatius T. Wathen. Pay roll designation, attendant; designation by actual work, attendant; where employed, Howard Hall department; compensation, \$18.

J. E. Suthard. Pay roll designation, attendant; designation by actual work, attendant (in band); where employed, Howard Hall department; compensation, \$32.50.

John Lenihan. Pay roll designation, attendant; designation by actual work, attendant; where employed, Howard Hall department; compensation, \$20.

Guy P. Linkins. Pay roll designation, attendant; designation by actual work, attendant; where employed, Howard Hall department; compensation, \$18.

J. A. Taylor. Pay roll designation, attendant; designation by actual work, attendant; where employed, Howard Hall department; compensation, \$22.

P. Boyle. Pay roll designation, attendant; designation by actual work, attendant; where employed, Howard Hall department; compensation, \$22.50.

Emerson Alexander. Pay roll designation, attendant; designation by actual work, attendant; where employed, Howard Hall department; compensation, \$32.50.

J. A. Ogden. Pay roll designation, attendant; designation by actual work, attendant; where employed, Howard Hall department; compensation, \$32.50.

Fitzhugh Lee. Pay roll designation, attendant; designation by actual work, attendant; where employed, Howard Hall department; compensation, \$18.

Jett Wayland. Pay roll designation, attendant; designation by actual work, attendant; where employed, Howard Hall department; compensation, \$22.50.

C. W. Doran. Pay roll designation, attendant; designation by actual work, attendant; where employed, Howard Hall department; compensation, \$30.

Daniel Boswell. Pay roll designation, attendant; designation by actual work, attendant; where employed, Howard Hall department; compensation, \$20.

C. R. Ferguson. Pay roll designation, attendant; designation by actual work, attendant; where employed, Toner and Oaks department; compensation, \$27.50.

Albert P. Scott. Pay roll designation, attendant; designation by actual work, attendant; where employed, Toner and Oaks department; compensation, \$22.

J. F. Yancey. Pay roll designation, attendant; designation by actual work, attendant; where employed, Toner and Oaks department; compensation, \$25.

T. J. James. Pay roll designation, attendant; designation by actual work, attendant; where employed, Toner and Oaks department; compensation, \$27.50.

G. M. Davis. Pay roll designation, attendant; designation by actual work, attendant; where employed, Toner and Oaks department; compensation, \$27.50.

A. C. Hayden. Pay roll designation, attendant; designation by actual work, attendant (in band); where employed, Toner and Oaks department; compensation, \$37.50.

C. R. Loucks. Pay roll designation, attendant; designation by actual work, night attendant; where employed, West Side; compensation, \$22.50.

Thomas L. Marr. Pay roll designation, attendant; designation by actual work, night attendant; where employed, West Side; compensation, \$20.

C. L. Lockwood. Pay roll designation, attendant; designation by actual work, night attendant; where employed, West Side; compensation, \$30.

D. W. Willett. Pay roll designation, attendant; designation by actual work, night attendant; where employed, West Side; compensation, \$32.50.

George G. Jones. Pay roll designation, attendant; designation by actual work, night attendant; where employed, West Side; compensation, \$22.50.

T. De Sayles Lyon. Pay roll designation, attendant; designation by actual work, night attendant; where employed, Howard Hall department; compensation, \$20.

Troy C. Thorne. Pay roll designation, attendant; designation by actual work, night attendant; where employed, Howard Hall department; compensation, \$20.

B. M. Davis. Pay roll designation, attendant; designation by actual work, night attendant; where employed, Toner and Oaks department; compensation, \$22.50.

Mary Bird. Pay roll designation, attendant; designation by actual work, attendant; where employed, East Side; compensation, \$25.

Jennie V. Locke. Pay roll designation, attendant; designation by actual work, attendant; where employed, East Side; compensation, \$22.50.

W. H. Adams. Pay roll designation, attendant; designation by actual work, painter; where employed, Howard Hall department; compensation, \$35.

Richard Burch. Pay roll designation, attendant; designation by actual work, painter; where employed, East Side; compensation, \$37.50.

E. J. Kidwell. Pay roll designation, attendant; designation by actual work, painter; where employed, Allison and Detached; compensation, \$37.50.

Samuel Keese. Pay roll designation, plasterer; designation by actual work, plasterer; where employed, buildings; compensation, \$60.

Joseph Allen (colored). Pay roll designation, laborer; designation by actual work, plasterer's laborer; where employed, buildings; compensation, \$35.

Clem Smith (colored). Pay roll designation, blacksmith; designation by actual work, blacksmith; where employed, shop; compensation, \$60.

Harry Anderson. Pay roll designation, helper; designation by actual work, assistant; where employed, shop; compensation, \$45.

John W. Barse. Pay roll designation, wheelwright; designation by actual work, wheelwright; where employed, shop; compensation, \$65.16.

Joseph B. Caldwell. Pay roll designation, musician; designation by actual work, bandsman (leader); where employed, in band only; compensation, \$35.

Charles Wagner. Pay roll designation, laborer; designation by actual work, bandsman; where employed, in band only; compensation, \$41.66.

John Bifield. Pay roll designation, boss laborer; designation by actual work, foreman of laborers; where employed, ———; compensation, \$83.33.

George Skidmore. Pay roll designation, chief engineer; designation by actual work, chief engineer; where employed, engineer department; compensation, \$100.

Walter Edwards. Pay roll designation, fireman; designation by actual work, engineer in charge (eight hours); where employed, electric plant; compensation, \$65.

Philip Chiseldine. Pay roll designation, assistant engineer; designation by actual work, engineer in charge (day) (twelve hours); where employed, pumping station; compensation, \$50.

Valentine B. Gousha. Pay roll designation, fireman; designation by actual work, engineer in charge (night) (twelve hours); where employed, pumping station; compensation, \$50.

John T. Harrison. Pay roll designation, assistant engineer; designation by actual work, engineer in charge (eight hours); where employed, machine shop; compensation, \$60.

Louis E. Cross. Pay roll designation, laborer; designation by actual work, engineer in charge (twelve hours); where employed, ice plant; compensation, \$50.

John Luckett. Pay roll designation, assistant engineer; designation by actual work, locomotive engineer (eight hours); where employed, locomotive; compensation, \$50.

Lewis Anderson. Pay roll designation, assistant engineer; designation by actual work, engineer at ice plant, relieves in pumping station (eight and twelve hours); compensation, \$50.

Joseph Black. Pay roll designation, assistant engineer; designation by actual work, first assistant engineer (eight hours); where employed, electric plant; compensation, \$60.

James Mullikin. Pay roll designation, fireman; designation by actual work, second assistant engineer (eight hours); where employed, electric plant; compensation, \$50.

William F. Green. Pay roll designation, fireman; designation by actual work, fireman, relieves in ice plant; general utility hand (eight and twelve hours); where employed, boiler house; compensation, \$40.

Charles Soper. Pay roll designation, fireman; designation by actual work, fireman, working patients supplying coal (eight and twelve hours); where employed, boiler house; compensation, \$40.

William Pumphrey. Pay roll designation, fireman; designation by actual work, fireman, utility hand in pipe gang (eight hours); where employed, Borrow's cottage; compensation, \$32.50.

Edward Tabbs. Pay roll designation, laborer; designation by actual work, fireman (eight hours); where employed, locomotive engine; compensation, \$25.

Timothy Nelligan. Pay roll designation, fireman; designation by actual work, fireman (eight hours); where employed, electric plant; compensation, \$40.

John McCory. Pay roll designation, laborer; designation by actual work, fireman (twelve hours); where employed, electric plant; compensation, \$40.

Albert Sandy. Pay roll designation, fireman; designation by actual work, fireman (twelve hours); where employed, electric plant; compensation, \$40.

William Edwards. Pay roll designation, fireman; designation by actual work, day fireman (twelve hours); where employed, boiler house; compensation, \$40.

Albert Soper. Pay roll designation, fireman; designation by actual work, day fireman (twelve hours); where employed, boiler house; compensation, \$40.

John Smith. Pay roll designation, fireman; designation by actual work, day fireman (twelve hours for five months in year); where employed, boiler house; compensation, \$40.

John Green. Pay roll designation, fireman; designation by actual work, night fireman (twelve hours); where employed, boiler house; compensation, \$40.

Alexander Barnes. Pay roll designation, laborer; designation by actual work, night fireman (eight hours); where employed, boiler house; compensation, \$35.

Henry Simms. Pay roll designation, laborer; designation by actual work, night fireman; where employed, boiler house; compensation, \$35.

Charles J. Montgomery. Pay roll designation, plumber; designation by actual work, plumber in charge (eight hours); compensation, \$60.

James Liston. Pay roll designation, laborer; designation by actual work, plumber's helper (eight hours); compensation, \$25.

Harry L. Kelly. Pay roll designation, laborer; designation by actual work, plumber's helper (eight hours); compensation, \$40.

Frank Boyle. Pay roll designation, laborer; designation by actual work, plumber's helper (eight hours); compensation, \$35.

George W. Soper. Pay roll designation, pipe worker; designation by actual work, steamfitter (eight hours); compensation, \$52.50.

Thomas Langley. Pay roll designation, fireman; designation by actual work, steamfitter (eight hours); compensation, \$40.

Henry Langley. Pay roll designation, fireman; designation by actual work, helper (eight and twelve hours); compensation, \$40.

E. Harry Wiesbrod. Pay roll designation, electrician; designation by actual work, head electrician; where employed, electrical department; compensation, \$100.

William F. Kelly. Pay roll designation, laborer; designation by actual work, assistant electrician; where employed, electrical department; compensation, \$70.

Henry C. Oliver. Pay roll designation, wireman; designation by actual work, wireman; where employed, electrical department; compensation, \$60.

Joseph W. Kelly. Pay roll designation, wireman; designation by actual work, wireman; where employed, electrical department; compensation, \$60.

Edward J. Earle. Pay roll designation, electrician; designation by actual work, wireman (temporary); where employed, electrical department; compensation, \$3.50 per day.

Walter J. Brooks. Pay roll designation, laborer; designation by actual work, helper; where employed, electrical department; compensation, \$15.

Harry Brooks. Pay roll designation, laborer; designation by actual work, helper (temporary); where employed, electrical department; compensation, \$1.75 per day.

Charles A. J. Williamson. Pay roll designation, superintendent construction; designation by actual work, superintendent construction; where employed, building department; compensation, \$100.

J. H. Awkward. Pay roll designation, carpenter; designation by actual work, carpenter; where employed, on repairs; compensation, \$83.33.

William A. Williamson. Pay roll designation, carpenter; designation by actual work, carpenter; where employed, on repairs; compensation, \$70.

F. T. Hayden. Pay roll designation, carpenter; designation by actual work, carpenter; where employed, on repairs; compensation, \$70.

George Gessford. Pay roll designation, carpenter; designation by actual work, carpenter; where employed, on improvements; compensation, \$3 per day.

William F. Harper. Pay roll designation, carpenter; designation by actual work, carpenter; where employed, on improvements; compensation, \$3 per day.

Thomas F. Williamson. Pay roll designation, carpenter; designation by actual work, carpenter; where employed, on improvements; compensation, \$3 per day.

William F. Reardon. Pay roll designation, carpenter; designation by actual work, carpenter; where employed, on improvements; compensation, \$45.

T. A. Dulaney. Pay roll designation, carpenter; designation by actual work, carpenter; where employed, on improvements; compensation, \$30.

Edward Flaberty. Pay roll designation, carpenter; designation by actual work, carpenter; where employed, greenhouse repairs; compensation, \$3 per day.

W. C. Thompson. Pay roll designation, laborer; designation by actual work, mill man; where employed, running machinery; compensation, \$47.50.

Jacob Leah. Pay roll designation, carpenter; designation by actual work, cabinet carpenter; where employed, making and repairing furniture; compensation, \$70.

Henry Stehr. Pay roll designation, carpenter; designation by actual work, cabinet carpenter; where employed, making and repairing furniture; compensation, \$70.

Frederick P. Noebe. Pay roll designation, cabinet carpenter; designation by actual work, cabinet carpenter; where employed, making and repairing furniture; compensation, \$65.

Albert Prevost. Pay roll designation, laborer; designation by actual work, carpenter's laborer; where employed, building department; compensation, \$1.20 per day.

William B. Dannison. Pay roll designation, laborer; designation by actual work, carpenter's laborer; where employed, building department; compensation, \$1.40 per day.

William R. Montgomery. Pay roll designation, tinner; designation by actual work, tinner; compensation, \$60.

George Baxter. Pay roll designation, tinner; designation by actual work, tinner; compensation, \$2.50 per day.

Albert R. Cator. Pay roll designation, painter; designation by actual work, painter; compensation, \$60.

Samuel Griffin. Pay roll designation, painter; designation by actual work, painter; compensation, \$40.

Edgar Balduston. Pay roll designation, painter; designation by actual work, painter; compensation, \$40.

H. R. Burch. Pay roll designation, attendant; designation by actual work, painter; where employed, West Side; compensation, \$37.50.

James L. Green. Pay roll designation, farm steward; designation by actual work, farm steward; where employed, on hospital farm; compensation, \$100.

John T. Dean. Pay roll designation, assistant steward; designation by actual work, foreman; where employed, on hospital farm; compensation, \$40.

John O. Stewart. Pay roll designation, gardener; designation by actual work, head gardener; where employed, garden; compensation, \$58.33.

Richard Liston. Pay roll designation, laborer; designation by actual work, farm hand; where employed, farm; compensation, \$32.50.

Sylvester Skinner. Pay roll designation, laborer; designation by actual work, farm hand; where employed, farm; compensation, \$25.

J. R. McDaniel. Pay roll designation, laborer; designation by actual work, farm hand; where employed, farm; compensation, \$25.

Richard H. Nelson. Pay roll designation, laborer; designation by actual work, farm hand; where employed, farm; compensation, \$27.50.

John F. Cox. Pay roll designation, laborer; designation by actual work, farm hand; where employed, farm; compensation, \$32.50.

William W. Conner. Pay roll designation, farmer; designation by actual work, charge Godding Croft; where employed, Godding Croft; compensation, \$40.

W. H. Barrett. Pay roll designation, laborer; designation by actual work, farm hand; where employed, Godding Croft; compensation, \$25.

James D. Barrett. Pay roll designation, laborer; designation by actual work, farm hand; where employed, Godding Croft; compensation, \$25.

Otto Weigel. Pay roll designation, laborer; designation by actual work, farm hand; where employed, Godding Croft; compensation, \$25.

George P. Soper. Pay roll designation, laborer; designation by actual work, farm hand; where employed, Godding Croft; compensation, \$25.

B. O. Cox. Pay roll designation, laborer; designation by actual work, working patients; where employed, Godding Croft; compensation, \$30.

Joseph C. Havenner. Pay roll designation, laborer; designation by actual work, working patients on farm, unloading coal; where employed, farm, boiler houses; compensation, \$32.50.

W. H. Nash. Pay roll designation, attendant; designation by actual work, working patients on railroad, unloading coal; compensation, \$35.

G. W. Owens. Pay roll designation, laborer; designation by actual work, working patients in garden; compensation, \$32.50.

A. O. Soper. Pay roll designation, laborer; designation by actual work, garden hand; where employed, garden; compensation, \$25.

Charles W. Cox. Pay roll designation, laborer; designation by actual work, garden hand; where employed, garden; compensation, \$25.

William Cator. Pay roll designation, laborer; designation by actual work, wagon driver, plowman; where employed, farm; compensation, \$25.

Wesley Padgett. Pay roll designation, laborer; designation by actual work, wagon driver, plowman; where employed, farm; compensation, \$25.

Charles Bonini. Pay roll designation, laborer; designation by actual work, wagon driver, plowman; where employed, farm; compensation, \$27.50.

T. E. Sydnor. Pay roll designation, laborer; designation by actual work, wagon driver, plowman; where employed, farm; compensation, \$25.

W. O. Beall. Pay roll designation, laborer; designation by actual work, wagon driver, plowman; where employed, farm; compensation, \$27.50.

William Burgess. Pay roll designation, laborer; designation by actual work, laundry wagon driver; where employed, laundry, wards, etc.; compensation, \$27.50.

Patrick Maloney. Pay roll designation, foreman laborers; designation by actual work, assistant to same; where employed, laundry, wards, etc.; compensation, \$32.50.

Charles H. Berry. Pay roll designation, laborer; designation by actual work, driver water wagon (drinking); where employed, buildings; compensation, \$30.

Edward Cook. Pay roll designation, laborer; designation by actual work, driver water wagon (cooking); where employed, buildings; compensation, \$25.

Clifford Pumphrey. Pay roll designation, laborer; designation by actual work, driver ice and supply wagon; where employed, buildings; compensation, \$27.50.

William T. Goodwin. Pay roll designation, laborer; designation by actual work, driver milk and vegetable wagon; where employed, buildings; compensation, \$27.50.

Edward J. Burke. Pay roll designation, laborer; designation by actual work, driver supply wagon; where employed, between Godding Croft and hospital; compensation, \$30.

G. H. Thomas. Pay roll designation, driver; designation by actual work, driver fertilizer wagon; where employed, barns; compensation, \$27.50.

Harrison Pleasant (colored). Pay roll designation, driver; designation by actual work, driver coal wagon; where employed, buildings; compensation, \$30.

Grandison Holliday (colored). Pay roll designation, laborer; designation by actual work, driver fertilizer wagon, cleaner; where employed, buildings; compensation, \$27.50.

R. L. Hyde. Pay roll designation, laborer; designation by actual work, cart driver; where employed, buildings and grounds; compensation, \$25.

James A. Cox. Pay roll designation, laborer; designation by actual work, cart driver; where employed, buildings and grounds; compensation, \$25.

Joseph M. Dean. Pay roll designation, laborer; designation by actual work, cart driver; where employed, farm; compensation \$25.

Josept Barrett. Pay roll designation, herdsman; designation by actual work, care of swine; where employed, piggery; compensation, \$40.

William W. Baker. Pay roll designation, laborer; designation by actual work, assistant in same; where employed, piggery; compensation, \$27.50.

Patrick Mellugh. Pay roll designation, laborer; designation by actual work, assistant in same; where employed, piggery; compensation, \$18.

E. W. Perrygo. Pay roll designation, laborer; designation by actual work, poultry man; where employed, poultry yard; compensation, \$45.

Cornelius Horrigan. Pay roll designation, laborer; designation by actual work, assistant to same; where employed, poultry yard; compensation, \$20.

John W. Dean. Pay roll designation, laborer; designation by actual work, straw-bed maker, farm hand; where employed, barns; compensation, \$27.50.

Patrick McAndrews. Pay roll designation, laborer; designation by actual work, harness and shoe repairer; where employed, old laundry building; compensation, \$30.

John Boyle. Pay roll designation, charge cemetery; designation by actual work, charge of cemetery; where employed, cemetery; compensation, \$45.

Fred Moore (colored). Pay roll designation, laborer; designation by actual work, laborer, excavator; where employed, cemetery; compensation, \$25.

Charles R. Dodge. Pay roll designation, sperintendent stable; designation by actual work, charge horse stable; where employed, stable; compensation, \$40.

Richard Moore (colored). Pay roll designation, driver; designation by actual work, mail carrier, utility hand; where employed, stable; compensation, \$35.

Lingan Anderson. Pay roll designation, driver; designation by actual work, charge messenger wagon; where employed, between city and hospital; compensation, \$37.50.

Samuel Briscoe (colored). Pay roll designation, driver; designation by actual work, coachman; where employed, stable; compensation, \$27.50.

Thomas Queen (colored). Pay roll designation, driver; designation by actual work, coachman; where employed, stable; compensation, \$27.50.

William White (colored). Pay roll designation, laborer; designation by actual work, coachman; where employed, stable; compensation, \$18.

William Williams (colored). Pay roll designation, driver; designation by actual work, coachman; where employed, stable; compensation, \$27.50.

Frank Lyles (colored). Pay roll designation, driver; designation by actual work, coachman; where employed, stable; compensation, \$27.50.

James Simms (colored). Pay roll designation, laborer; designation by actual work, hostler; where employed, stable; compensation, \$25.

Clifford Andrews (colored). Pay roll designation, driver; designation by actual work, hostler; where employed, stable; compensation \$25.

Samuel Covington (colored). Pay roll designation, driver; designation by actual work, stableman; where employed, stable; compensation, \$25.

George Luckett (colored). Pay roll designation, laborer; designation by actual work, stableman; where employed, stable; compensation, \$25.

Hippolyte Taulelle. Pay roll designation, laborer; designation by actual work, stableman; where employed, stable; compensation, \$22.50.

Alvah Godding. Pay roll designation, superintendent of grounds; designation by actual work, charge of grounds; where employed, grounds, greenhouse; compensation, \$50.

James White. Pay roll designation, florist; designation by actual work, head florist; where employed, greenhouse; compensation, \$75.

Louis E. Weigel. Pay roll designation, laborer; designation by actual work, assistant florist, charge of patients at greenhouse; where employed, greenhouse; compensation, \$35.

Michael Graner. Pay roll designation, laborer; designation by actual work, assistant florist; where employed, greenhouse; compensation, \$27.50.

Heinrich Sodermann. Pay roll designation, laborer; designation by actual work, gardener, in band; where employed, greenhouse; compensation, \$35.

Henry Slater. Pay roll designation, laborer; designation by actual work, laboring work; where employed, greenhouse; compensation, \$10.

Alonzo Henrick. Pay roll designation, vine dresser; designation by actual work, charge vineyard; where employed, vineyard; compensation, \$58.33.

Patrick Connors. Pay roll designation, attendant; designation by actual work, working patients in vine yard; where employed, vineyard; compensation, \$35.

Joseph Dyer. Pay roll designation, attendant; designation by actual work, working patients, lawns and roads; compensation, \$35.

Stonewall J. Kearns. Pay roll designation, paver; designation by actual work, stonemason; where employed, repairs, improvements; compensation, \$45.

George McGill. Pay roll designation, laborer; designation by actual work, sweeper and cleaner; where employed, buildings and grounds; compensation, \$25.

L. E. Cook. Pay roll designation, laborer; designation by actual work, lawn mower in summer, tree trimmer and painter at other times; compensation, \$25.

Jackson Gordon. Pay roll designation, laborer; designation by actual work, whitewasher; where employed, wards and basements; compensation, \$32.50.

Julius F. Dietrich. Pay roll designation, chief herdsman; designation by actual work, charge of dairy; where employed, dairy; compensation, \$65.

Spencer Edelin. Pay roll designation, laborer; designation by actual work, milkman and dairy helper; where employed, dairy; compensation, \$25.

Charles Hayes. Pay roll designation, laborer; designation by actual work, milkman and dairy helper; where employed, dairy; compensation, \$22.50.

Andrew Baldwin. Pay roll designation, laborer; designation by actual work, milkman and dairy helper; where employed, dairy; compensation, \$22.50.

John Baxter. Pay roll designation, laborer; designation by actual work, milkman and dairy helper; where employed, dairy; compensation, \$22.50.

Dell Jamison. Pay roll designation, laborer; designation by actual work, milkman and dairy helper; where employed, dairy; compensation, \$18.

James Baldwin. Pay roll designation, laborer; designation by actual work, milkman and dairy helper; where employed, dairy; compensation, \$18.

Walter Pearson. Pay roll designation, laborer; designation by actual work, milkman and dairy helper; where employed, dairy; compensation, \$20.

Gustav Otto. Pay roll designation, laborer; designation by actual work, milkman and dairy helper; where employed, dairy; compensation, \$20.

Harvey L. Rusk. Pay roll designation, laborer; designation by actual work, milkman and dairy helper; where employed, dairy; compensation, \$18.

Wallace Moore (colored). Pay roll designation, laborer; designation by actual work, milkman and dairy helper; where employed, dairy; compensation, \$25.

Marbury M. Lyons. Pay roll designation, laborer; designation by actual work, milkman and dairy helper; where employed, dairy; compensation, \$25.

Evander French. Pay roll designation, steward; designation by actual work, house steward; where employed, general kitchen; compensation, \$100.

Mary O'Leary, housekeeper. Designation by actual work, housekeeper; where employed, general kitchen; compensation, \$55.

Jane Mullikin. Pay roll designation, cook; designation by actual work, assistant housekeeper; where employed, general kitchen; compensation, \$37.50.

M. Louise Mark. Pay roll designation, dietitian; designation by actual work, dietitian; where employed, charge Allison and detached kitchen; compensation, \$30.

M. B. McIntyre. Pay roll designation, matron; designation by actual work, matron; compensation, \$50.

George Suppes. Pay roll designation, baker; designation by actual work, foreman of bakery; where employed, general kitchen; compensation, \$60.

Herman Willer. Pay roll designation, baker; designation by actual work, assistant baker; where employed, general kitchen; compensation, \$37.50.

Peter Stang. Pay roll designation, baker; designation by actual work, assistant baker; where employed, general kitchen; compensation, \$40.

Rudolph Hoffman. Pay roll designation, baker; designation by actual work, assistant baker; where employed, general kitchen; compensation, \$40.

George Arendes. Pay roll designation, baker; designation by actual work, assistant baker; where employed, general kitchen; compensation, \$35.

William Klug. Pay roll designation, baker; designation by actual work, night baker; where employed, general kitchen; compensation, \$37.50.

Christian Hobbeln. Pay roll designation, laborer; designation by actual work, night baker; where employed, general kitchen; compensation, \$37.50.

John Reed. Pay roll designation, laborer; designation by actual work, fireman; where employed, general kitchen; compensation, \$35.

Ernest Scott (colored). Pay roll designation, laborer; designation by actual work, fireman; where employed, Allison and detached kitchen; compensation, \$18.

Ernest Seaman. Pay roll designation, cook; designation by actual work, chief cook; where employed, Toner and Oaks kitchen; compensation, \$40.

Margaret Schultheis. Pay roll designation, cook; designation by actual work, cook; where employed, superintendent's kitchen; compensation, \$25.

Mary E. Simms (colored). Pay roll designation, cook; designation by actual work, cook; where employed, physicians' kitchen; compensation, \$22.50.

Annie Stewart (colored). Pay roll designation, laborer; designation by actual work, physicians' cook; where employed, Allison and detached kitchen; compensation, \$18.

Dennis Frye (colored). Pay roll designation, cook; designation by actual work, cook; where employed, Allison and detached kitchen; compensation, \$40.

Sarah Malone (colored). Pay roll designation, laborer; designation by actual work, head cook, sick diet; where employed, Allison and detached kitchen; compensation, \$20.

Fannie Anderson (colored). Pay roll designation, laborer; designation by actual work, cook, sick diet; where employed, Allison and detached kitchen; compensation, \$15.

Daniel Brooks (colored). Pay roll designation, laborer; designation by actual work, cook, sick diet; where employed, Allison and detached kitchen; compensation, \$15.

Catherine Motten (colored). Pay roll designation, laborer; designation by actual work, cook, sick diet; where employed, Toner and Oaks kitchen; compensation, \$12.

Martha Moore (colored). Pay roll designation, laborer; designation by actual work, cook, sick diet; where employed, Toner and Oaks kitchen; compensation, \$10.

Fannie Bonini (colored). Pay roll designation, laborer; designation by actual work, cook; where employed, Toner and Oaks kitchen; compensation, \$10.

Ella Barrett. Pay roll designation, laborer; designation by actual work, cook; where employed, Toner and Oaks kitchen; compensation, \$10.

Mary Durnin. Pay roll designation, cook; designation by actual work, pastry cook; where employed, general kitchen; compensation, \$25.

Nellie Riordan. Pay roll designation, cook; designation by actual work, special diet cook; where employed, general kitchen; compensation, \$22.50.

Jane Green. Pay roll designation, laborer; designation by actual work, special diet cook; where employed, general kitchen; compensation, \$15.

Dicie Danage (colored). Pay roll designation, laborer; designation by actual work, first section cook; where employed, general kitchen; compensation, \$20.

Eva Taylor. Pay roll designation, laborer; designation by actual work, first section cook; where employed, general kitchen; compensation, \$15.

Sallie H. Johnson. Pay roll designation, cook; designation by actual work, night cook; where employed, general kitchen; compensation, \$25.

Nettie Mattingly. Pay roll designation, laborer; designation by actual work, helper to night cook; where employed, general kitchen; compensation, \$12.

Eva Johnson. Pay roll designation, laborer; designation by actual work, vegetable cook; where employed, general kitchen; compensation, \$17.

James Sayles (colored). Pay roll designation, cook; designation by actual work, meat cook; where employed, general kitchen; compensation, \$42.50.

Albert Ball. Pay roll designation, laborer; designation by actual work, second meat cook; where employed, general kitchen; compensation, \$40.

Richard Cook. Pay roll designation, laborer; designation by actual work, vegetable cook; where employed, general kitchen; compensation, \$32.50.

J. Selden (colored). Pay roll designation, laborer; designation by actual work, assistant cook; where employed, Allison and Detached; compensation, \$21.

Mary Newton (colored). Pay roll designation, laborer; designation by actual work, assistant cook; where employed, Allison and Detached; compensation, \$24.

Patsy Bunday (colored). Pay roll designation, laborer; designation by actual work, assistant cook; where employed, Allison and Detached; compensation, \$19.

Jane Lewis (colored). Pay roll designation, laborer; designation by actual work, waitress, colored dining room; where employed, general kitchen; compensation, \$13.

Ophelia Purvis. Pay roll designation, laborer; designation by actual work, waitress, employees' D. R.; where employed, general kitchen; compensation, \$14.

Violet Simpson. Pay roll designation, laborer; designation by actual work, waitress, employees' D. R. pantry; where employed, general kitchen; compensation, \$13.

Alice Gawen. Pay roll designation, laborer; designation by actual work, waitress, employees' D. R.; where employed, general kitchen; compensation, \$14.

Rose Padgett. Pay roll designation, laborer; designation by actual work, waitress, employees' D. R.; where employed, general kitchen; compensation, \$14.

Lena Rawlings. Pay roll designation, laborer; designation by actual work, waitress, employees' D. R.; where employed, general kitchen; compensation, \$14.

Lillie Moore. Pay roll designation, laborer; designation by actual work, waitress, charge employees' D. R.; where employed, Toner and Oaks; compensation, \$14.

Julia I. Wood. Pay roll designation, laborer; designation by actual work, waitress, assistant in same; where employed, Toner and Oaks; compensation, \$10.

Carrie Brady. Pay roll designation, laborer; designation by actual work, waitress, charge physicians' D. R.; where employed, Toner and Oaks; compensation, \$10.

Lizzie W. Carter. Pay roll designation, laborer; designation by actual work, charge physicians' kitchen; where employed, Toner and Oaks; compensation, \$18.

Fannie T. Carter. Pay roll designation, laborer; designation by actual work, charge patients' D. R.; where employed, Toner and Oaks; compensation, \$22.50.

Bertha Thomas. Pay roll designation, laborer; designation, assistant in same; where employed, Toner and Oaks; compensation, \$15.

Katherine Berry. Pay roll designation, laborer; designation by actual work, assistant in same; where employed, Toner and Oaks; compensation, \$12.

Mary E. Davis (colored). Pay roll designation, domestic; designation by actual work, dining-room domestic; where employed, Howard Hall department; compensation, \$10.

Richard Craig (colored). Pay roll designation, laborer; designation by actual work, attendants' dining-room domestic; where employed, Allison and detached; compensation, \$17.

Fred. Miner (colored). Pay roll designation, laborer; designation by actual work, attendants' dining-room domestic; where employed, Allison and detached; compensation, \$17.

Charles Monroe (colored). Pay roll designation, laborer; designation by work, attendants' dining-room domestic; where employed, Allison and detached; tual work, dining-hall domestic; where employed, Allison and detached; compensation, \$15.

Mary Needer. Pay roll designation, laborer; designation by actual work; cook, Borrows' Cottage; where employed, detached building; compensation, \$10.

Rose Sellner. Pay roll designation, laborer; designation by actual work, waitress and chambermaid; where employed, Borrows' Cottage; compensation, \$10.

J. R. Long. Pay roll designation, laborer; designation by actual work, carman; where employed, Allison and detached; compensation, \$20.

Albert McCullen. Pay roll designation, laborer; designation by actual work, carman; where employed, Allison and detached; compensation, \$12.

Firdy Biggs. Pay roll designation, laborer; designation by actual work, scullion; where employed, Allison and detached; compensation, \$14.

Ignatius Briscoe. Pay roll designation, laborer; designation by actual work, domestic about building; where employed, Allison and detached; compensation, \$15.

Lucy Lee (colored). Pay roll designation, domestic; designation by actual work, ward domestic; where employed, East Side; compensation, \$10.

Mary Van Buren (colored). Pay roll designation, domestic; designation by actual work, ward domestic; where employed, East Side; compensation, \$10.

Lucy Ellis (colored). Pay roll designation, domestic; designation by actual work, ward domestic; where employed, East Side; compensation, \$10.

Martha Simms (colored). Pay roll designation, domestic; designation by actual work, ward domestic; where employed, East Side; compensation, \$12.

Celia Cook (colored). Pay roll designation, domestic; designation by actual work, ward domestic; where employed, East Side; compensation, \$12.

Daisy Ware (colored). Pay roll designation, domestic; designation by actual work, ward domestic; where employed, East Side; compensation, \$12.

Sarah Holiday (colored). Pay roll designation, domestic; designation by actual work, ward domestic; where employed, East Side; compensation, \$10.

Charlotte Dotson (colored). Pay roll designation, domestic; designation by actual work, ward domestic; where employed, East Side; compensation, \$12.

Martha Somerville (colored). Pay roll designation, domestic; designation by actual work, ward domestic; where employed, East Side; compensation, \$12.

Annie Hawkins (colored). Pay roll designation, domestic; designation by actual work, ward domestic; where employed, East Side; compensation, \$10.

Maria Spriggs (colored). Pay roll designation, domestic; designation by actual work, ward domestic; where employed, East Side; compensation, \$12.

Alice Garner (colored). Pay roll designation, domestic; designation by actual work, ward domestic; where employed, East Side; compensation, \$10.

Edward T. Davis. Pay roll designation, janitor; designation by actual work, usher, in band, choir, etc.; where employed, Administration building, main hall; compensation, \$35.

Mollie A. Callan. Pay roll designation, laborer; designation by actual work, hall maid; where employed, Administration building, main hall; compensation, \$18.

Lorena Cropp. Pay roll designation, laborer; designation by actual work, hall maid; where employed, Administration building, main hall; compensation, \$16.

Daniel Courtney. Pay roll designation, laborer; designation by actual work, messenger; where employed, Toner and Oaks; compensation, \$20.

George Hooper. Pay roll designation, laborer; designation by actual work, janitor, douche room; where employed, Toner and Oaks; compensation, \$25.

William G. Ashby, M. D. Pay roll designation, attendant; designation by actual work, charge electric room; where employed, Toner and Oaks; compensation, \$40.

James Prue (colored). Pay roll designation, laborer; designation by actual work, dining hall domestic; where employed, Allison and Detached; compensation, \$15.

Henry Prue (colored). Pay roll designation, laborer; designation by actual work, dining hall domestic; where employed, Allison and Detached; compensation, \$15.

Clarence Burch. Pay roll designation, laborer; designation by actual work, kitchen domestic; where employed, Toner and Oaks; compensation, \$10.

George Martin. Pay roll designation, laborer; designation by actual work, kitchen domestic; where employed, Toner and Oaks; compensation, \$10.

L. S. Hill (colored). Pay roll designation, laborer; designation by actual work, kitchen domestic; where employed, Allison and Detached; compensation, \$15.

James Summerville (colored). Pay roll designation, laborer; designation by actual work, kitchen domestic; where employed, Allison and Detached; compensation, \$14.

Solomon Howard (colored). Pay roll designation, laborer; designation by actual work, kitchen domestic; where employed, Allison and Detached; compensation, \$20.

Emma Rawlings. Pay roll designation, laborer; designation by actual work, kitchen domestic, relieves night cook; where employed, general kitchen; compensation, \$12.

Elsie Hammett. Pay roll designation, laborer; designation by actual work, kitchen domestic, relieves in dining room; where employed, general kitchen; compensation, \$10.

Effie Cox. Pay roll designation, laborer; designation by actual work, kitchen domestic, relieves in dining room; where employed, general kitchen; compensation, \$10.

Emma Hysler. Pay roll designation, laborer; designation by actual work, kitchen domestic; where employed, general kitchen; compensation, \$10.

Mary Clements. Pay roll designation, laborer; designation by actual work, kitchen domestic; where employed, general kitchen; compensation, \$12.

Marian Mayo. Pay roll designation, laborer; designation by actual work, kitchen domestic; where employed, general kitchen; compensation, \$10.

Carrie Burch. Pay roll designation, laborer; designation by actual work, kitchen domestic; where employed, general kitchen; compensation, \$12.

Elizabeth Corbin (colored). Pay roll designation, laborer; designation by actual work, kitchen domestic; where employed, general kitchen; compensation, \$12.

Mamie Langley. Pay roll designation, laborer; designation by actual work, kitchen domestic; where employed, general kitchen; compensation, \$12.

Rosie Talbert. Pay roll designation, laborer; designation by actual work, kitchen domestic; where employed, general kitchen, compensation, \$10.

Lessie Browning. Pay roll designation, laborer; designation by actual work, charge working patients; where employed, general kitchen; compensation, \$15.

Frances Holland (colored). Pay roll designation, laborer; designation by actual work, relief hand; where employed, general kitchen; compensation, \$14.

Eli Banks (colored). Pay roll designation, laborer; designation by actual work, relief hand during vacations; where employed, general kitchen; compensation, \$20.

Hubert Sanders. Pay roll designation, laborer; designation by actual work, spare hand; where employed, general kitchen; compensation, \$25.

Richard Gattton. Pay roll designation, laborer; designation by actual work, truckman, East Side; where employed, general kitchen; compensation, \$25.

William Howe. Pay roll designation, laborer; designation by actual work, truckman, East Side; where employed, general kitchen; compensation, \$20.

Arthur Dement. Pay roll designation, laborer; designation by actual work, truckman, East Side; where employed, general kitchen; compensation, \$16.

Francis Perkins. Pay roll designation, laborer; designation by actual work, truckman, West Side; where employed, general kitchen; compensation, \$16.

Sim Biggs. Pay roll designation, laborer; designation by actual work, truckman, West Side; where employed, general kitchen; compensation, \$12.

George Baxter. Pay roll designation, laborer; designation by actual work, elevator, dishes meat, and assists fireman; where employed, general kitchen; compensation, \$35.

J. L. Padgett. Pay roll designation, laborer; designation by actual work, iceman; where employed, general kitchen; compensation, \$25.

William Sellner. Pay roll designation, laborer; designation by actual work, butcher; where employed, general kitchen; compensation, \$35.

Jeremiah Desmond. Pay roll designation, laborer; designation by actual work, assistant to butcher; where employed, general kitchen; compensation, \$20.

John Washington (colored). Pay roll designation, laborer; designation by actual work, scrubber; where employed, general kitchen; compensation, \$10.

Henry Washington (colored). Pay roll designation, laborer; designation by actual work, general helper and car tender; where employed, general kitchen; compensation, \$10.

Edith Moore. Pay roll designation, laborer; designation by actual work, chambermaid, kitchen building; where employed, general kitchen; compensation, \$14.

Lydia Harvey. Pay roll designation, laborer; designation by actual work, chambermaid, mechanics' building; where employed, general kitchen; compensation, \$14.

Nora Murphy. Pay roll designation, laborer; designation by actual work, chambermaid, bakery building; where employed, general kitchen; compensation, \$14.

M. M. Roseberry. Pay roll designation, laborer; designation by actual work, chamberman; where employed, in stable; compensation, \$25.

Maggie Bond. Pay roll designation, laborer; designation by actual work, chambermaid; where employed, Toner and Oaks; compensation, \$15.

Ora Nabors. Pay roll designation, laborer; designation by actual work, chambermaid; where employed, Toner and Oaks; compensation, \$14.

Grace E. Cox. Pay roll designation, laborer; designation by actual work, chambermaid; where employed, Toner and Oaks; compensation, \$11.

Katie W. Berry. Pay roll designation, laborer; designation by actual work, chambermaid; where employed, Toner and Oaks; compensation, \$10.

M. E. Cox. Pay roll designation, laborer; designation by actual work, chambermaid; where employed, Godding Croft; compensation, \$14.

Nellie Poore. Pay roll designation, laborer; designation by actual work, chambermaid, Administration Building; where employed, second floor; compensation \$18.

Bridget Brosnan. Pay roll designation, laborer; designation by actual work, chambermaid, Administration Building; where employed, second floor; compensation, \$15.

Mary Kearney. Pay roll designation, laborer; designation by actual work, chambermaid; where employed, third and fourth floors; compensation, \$14.

Annie Edelin. Pay roll designation, laborer; designation by actual work, chambermaid; where employed, fourth floor; compensation, \$14.

Bessie Hutcherson. Pay roll designation, laborer; designation by actual work, chambermaid; where employed, laundry; compensation, \$10.

Julia Brosnan. Pay roll designation, laborer; designation by actual work, waitress and chambermaid; where employed, Atts. D. R. west—fourth floor east; compensation, \$14.

Carrie Smith. Pay roll designation, laborer; designation by actual work, waitress and chambermaid; where employed, West Side; compensation \$14.

Lizzie Scott (colored). Pay roll designation, laborer; designation by actual work, waitress and chambermaid; where employed, colored dining room, laundry, gate house; compensation, \$10.

Annie McNamara. Pay roll designation, laborer; designation by actual work, waitress and chambermaid; where employed, East Side; compensation, \$14.

Johanna Horrigan. Pay roll designation, laborer; designation by actual work, waitress and chambermaid; where employed, East Side; compensation, \$14.

Josephine Murphy. Pay roll designation, laborer; designation by actual work, waitress; where employed, Atts. D. R. west; compensation, \$14.

Bertie Krahling. Pay roll designation, laborer; designation by actual work, waitress; where employed, Atts. D. R. west; compensation, \$14.

Janie Campbell. Pay roll designation, laborer; designation by actual work, waitress; where employed, Atts. D. R. east; compensation, \$14.

Mary Broderick. Pay roll designation, laborer; designation by actual work, waitress; where employed, Atts. D. R. east; compensation, \$14.

Katie Murphy. Pay roll designation, laborer; designation by actual work, waitress; where employed, superintendent's dining room; compensation, \$18.

Lucy Smith. Pay roll designation, laborer; designation by actual work, waitress; where employed, physicians' dining room; compensation, \$15.

Augusta Remsen. Pay roll designation, laborer; designation by actual work, relief girl; compensation, \$10.

Edward L. Maenche. Pay roll designation, superintendent of laundry; designation by actual work, superintendent of laundry; where employed, laundry; compensation, \$75.

Odie Ball. Pay roll designation, laundryman; designation by actual work, sorter; where employed, laundry; compensation, \$30.

James Burroughs. Pay roll designation, laborer; designation by actual work, sorter; where employed, laundry; compensation, \$20.

Esquire Harrod. Pay roll designation, laundryman; designation by actual work, washman; where employed, laundry; compensation, \$27.50.

Spencer Herbert. Pay roll designation, laborer; designation by actual work, sorter; where employed, laundry; compensation, \$18.

Ernest Kletsch. Pay roll designation, laborer; where employed, laundry; compensation, \$22.50.

T. L. McMurray. Pay roll designation, laborer; designation by actual work, washman; where employed, laundry; compensation, \$32.50.

Harry Satterfield. Pay roll designation, laborer; designation by actual work, washman (relieving); where employed, laundry; compensation, \$22.50.

Wilson Tyler. Pay roll designation, laborer; designation by actual work, sorter; where employed, laundry; compensation, \$25.

Lewis Taylor. Pay roll designation, laborer; designation by actual work, elevator; where employed, laundry; compensation, \$18.

Virginia Burroughs. Pay roll designation, laborer; designation by actual work, ironing machine; where employed, laundry; compensation, \$12.

Florence Burch. Pay roll designation, laborer; designation by actual work, hand ironer; where employed, laundry; compensation, \$11.

Ruby Berry. Pay roll designation, laborer; designation by actual work, mangle; where employed, laundry; compensation, \$10.

Florence Brewer. Pay roll designation, laborer; designation by actual work, mangle; where employed, laundry; compensation, \$10.

Ella Cook. Pay roll designation, laborer; designation by actual work, machine hand; where employed, laundry; compensation, \$15.

Omie Cadell. Pay roll designation, laborer; designation by actual work, hand ironer; where employed, laundry; compensation, \$12.

Lillie Clark. Pay roll designation, laborer; designation by actual work, ironing machine; where employed, laundry; compensation, \$11.

Grace Davis. Pay roll designation, laborer; designation by actual work, ironing, dampening; where employed, laundry; compensation, \$13.

Rosalie Davis. Pay roll designation, laborer; designation by actual work, mangle; where employed, laundry; compensation, \$10.

Mabel Dement. Pay roll designation, laborer; designation by actual work, mangle; where employed, laundry; compensation, \$12.

Nellie Dement. Pay roll designation, laborer; designation by actual work, charge male patients and mangle; where employed, laundry; compensation, \$12.

Mary Donohue. Pay roll designation, laborer; designation by actual work, folder; where employed, laundry; compensation, \$13.

Effie Farr. Pay roll designation, laborer; designation by actual work, ironing machine; where employed, laundry; compensation, \$15.

Winnie Frazier. Pay roll designation, laborer; designation by actual work, dry room; where employed, laundry; compensation, \$15.

May Gallahan. Pay roll designation, laborer; designation by actual work, ironing machine; where employed, laundry; compensation, \$15.

Estelle Goodwin. Pay roll designation, laborer; designation by actual work, hand ironer; where employed, laundry; compensation, \$10.

Sallie Gibbons. Pay roll designation, laborer; designation by actual work, mangle; where employed, laundry; compensation, \$10.

Rosie Hunt. Pay roll designation, laborer; designation by actual work, hand ironer; where employed, laundry; compensation, \$10.

Gertie Hazel. Pay roll designation, laborer; designation by actual work, in charge female patients; where employed, laundry; compensation, \$15.

Minney Hutchinson. Pay roll designation, laborer; designation by actual work, sorter; where employed, laundry; compensation, \$12.

Mollie Hutchinson. Pay roll designation, laborer; designation by actual work, finishing machine; where employed, laundry; compensation, \$14.

Maggie Herbert. Pay roll designation, laborer; designation by actual work, hand ironer; where employed, laundry; compensation, \$10.

Sympronia Howard. Pay roll designation, laborer; designation by actual work, starcher; where employed, laundry; compensation, \$11.

Nellie Jenkins. Pay roll designation, laborer; designation by actual work, mangle; where employed, laundry; compensation, \$10.

Julia Kendall. Pay roll designation, laborer; designation by actual work, ironing machine; where employed, laundry; compensation, \$10.

Alice Klug. Pay roll designation, laborer; designation by actual work, mangle; where employed, laundry; compensation, \$11.

Clestia King. Pay roll designation, laborer; designation by actual work, ironing machine; where employed, laundry; compensation, \$10.

Clara King. Pay roll designation, laborer; designation by actual work, mangle; where employed, laundry, compensation, \$10.

Agnes Lynch. Pay roll designation, laborer; designation by actual work, ironing machine; where employed, laundry; compensation, \$14.

Nellie Mangum. Pay roll designation, laborer; designation by actual work, mangle; where employed, laundry; compensation, \$10.

Annie Mangum. Pay roll designation, laborer; designation by actual work, mangle; where employed, laundry; compensation, \$10.

Lizzie Marr. Pay roll designation, laborer; designation by actual work, machine hand; where employed, laundry; compensation, \$10.

Hattie Nelson. Pay roll designation, laborer; designation by actual work, physician's wash; where employed, laundry; compensation, \$14.

Elizabeth Proctor. Pay roll designation, laborer; designation by actual work, hand washing; where employed, laundry; compensation, \$15.

Annie Pearson. Pay roll designation, laborer; designation by actual work, dampening and ironing; where employed, laundry; compensation, \$10.

Marion Quarles. Pay roll designation, laborer; designation by actual work, starching; where employed, laundry; compensation, \$12.

Betty Redd. Pay roll designation, laborer; designation by actual work, sorter; where employed, laundry; compensation, \$22.50.

Bridget Ryan. Pay roll designation, laborer; designation by actual work, hand ironing; where employed, laundry; compensation, \$12.

Hattie Stamp. Pay roll designation, laborer; designation by actual work, hand ironing; where employed, laundry; compensation, \$12.

Lida Smithson. Pay roll designation, laborer; designation by actual work, mangle; where employed, laundry; compensation, \$11.

Mary Scott. Pay roll designation, laborer; designation by actual work, charge special wash; where employed, laundry; compensation, \$14.

Bessie Taylor. Pay roll designation, laborer; designation by actual work, hand ironing; where employed, laundry; compensation, \$14.

Grace Tippet. Pay roll designation, laborer; designation by actual work, hand ironing; where employed, laundry; compensation, \$10.

Emma Williams. Pay roll designation, laborer; designation by actual work, physicians' wash; where employed, laundry; compensation, \$15.

Alice White. Pay roll designation, laborer; designation by actual work, folder; where employed, laundry; compensation, \$13.

Etta Westnedge. Pay roll designation, laborer; designation by actual work, hand ironing; where employed, laundry; compensation, \$13.

Ada D. Posey. Pay roll designation, laborer; designation by actual work, charge mending room, assistant in laundry; where employed, laundry; compensation, \$30.

Helen G. Leitch. Pay roll designation, laborer; designation by actual work, seamstress; relieves Mrs. Posey; also in charge of laundry force (female) at night and in event of illness; where employed, laundry; compensation, \$15.

Josephine Holderby. Pay roll designation, laborer; designation by actual work, seamstress; where employed, laundry; compensation, \$15.

Kate McNamara. Pay roll designation, laborer; designation by actual work, seamstress; where employed, laundry; compensation, \$22.50.

Ida Berry (colored). Pay roll designation, laborer; designation by actual work, seamstress; where employed, laundry; compensation, \$14.

Mary C. Quaid. Pay roll designation, seamstress; designation by actual work, seamstress; head women's workroom; relieves in dining room each third Sunday; where employed, storehouse; compensation, \$30.

M. V. Robey. Pay roll designation, seamstress; designation by actual work, seamstress, charge patients' sewing on wards, relieves on wards every other Sunday; where employed, east side; compensation, \$25.

Martha Weedon. Pay roll designation, seamstress; designation by actual work, seamstress, relieves in dining room every third Sunday; where employed, storehouse; compensation, \$20.

Fannie Carter. Pay roll designation, laborer; designation by actual work, seamstress, relieves in dining room every third Sunday; where employed, storehouse; compensation, \$15.

Sophia C. French. Pay roll designation, seamstress; designation by actual work, seamstress, relieves in grocery department every other Sunday; where employed, storehouse; compensation, \$18.

Lillie M. Ball. Pay roll designation, laborer; designation by actual work, seamstress, relieves on center every third Sunday; also on month days and vacations; where employed, storehouse; compensation, \$15.

Addie B. Phipps. Pay roll designation, laborer; designation by actual work, seamstress, relieves in physicians' dining room two evenings a week, every other Sunday, month days, and vacations; where employed, storehouse; compensation, \$16.

B. H. Remsen. Pay roll designation, seamstress; designation by actual work, seamstress, no relieving; where employed, storehouse; compensation, \$20.

Sarah Dean. Pay roll designation, laborer; designation by actual work, seamstress; where employed, storehouse; compensation \$15.

Jane Bevan. Pay roll designation, laborer; designation by actual work, seamstress; where employed, storehouse; compensation, \$15.

William D. Barry. Pay roll designation, charge tailor shop; designation by actual work, charge tailor shop, supervises band matters, etc.; where employed, storehouse; compensation, \$75.

Harrie A. Pratt. Pay roll designation, ; designation by actual work, investigator of dietaries; where employed, storehouse; compensation, \$75.

Nathaniel R. Harnish. Pay roll designation, storekeeper; designation by actual work, storekeeper, grocery department; where employed, storehouse; compensation, \$75.

Annie S. Harnish. Pay roll designation, assistant storekeeper; designation by actual work, assistant storekeeper; where employed, storehouse; compensation, \$20.

Kate Barry. Pay roll designation, seamstress; designation by actual work, storekeeper, dry goods department, relieves on center every third Sunday; where employed, storehouse; compensation, \$18.

Margaret Mullen. Pay roll designation, helper in storeroom; designation by actual work, clerical work, storehouse; where employed, storehouse; compensation, \$30.

Pay roll as at present classified under Doctor White.

SUPERINTENDENT AND STAFF.

Wages per annum.	Minimum.	Maximum.
Superintendent.....	\$4,000.00	\$4,000.00
First assistant physician.....	2,000.00	2,500.00
Second assistant physician.....	1,500.00	2,000.00
Assistant physicians.....	1,200.00	1,500.00
Pathologist.....		2,000.00
Woman assistant physician.....		1,500.00
Junior assistant physician.....	900.00	1,200.00
Night medical officer (grade of junior assistant physician).....	900.00	1,200.00
Medical internes.....	600.00	600.00

NOTE.—Increase of wages of assistant physicians from minimum to maximum shall be made at the rate of \$100 at the end of each year of continuous service until limit is reached.

Wages per month.	Male.		Female.	
	Minimum.	Maximum.	Minimum.	Maximum.
<i>Office force.</i>				
Chief clerk.....			\$100.00	\$125.00
Time and pay clerk.....		\$65.00		
Copyist and pay clerk.....				60.00
Bill clerk.....		50.00		
File clerk.....			40.00	50.00
Record clerk.....			40.00	50.00
Secretary to superintendent.....				65.00
Stenographer and typewriter.....			40.00	40.00
Pension clerk, etc.....		100.00		
Clerk typewriter.....		65.00		
Civil service clerk, etc.....		50.00		
Purchasing agent.....		125.00		

Attendants, nurses, and supervisors.

Wages per month.	Male.		Female.	
	Minimum.	Maximum.	Minimum.	Maximum.
Probationers	\$18.00	\$18.00	\$14.00	\$14.00
Attendants	20.00	30.00	15.00	25.00
Charge attendants	25.00	35.00	20.00	30.00
Nurses	25.00	35.00	20.00	30.00
Charge nurses	30.00	40.00	25.00	35.00
Assistant supervisors	35.00	50.00	30.00	45.00
Supervisors	40.00	60.00	35.00	55.00
The period of probation shall be the first six months. All advances in the above scale of wages from minimum to maximum in each grade to be made at the rate of \$2.50 for each six months of continuous service until limit is reached.				
Female attendants and nurses on duty in male wards to receive \$2.50 extra each per month.				
Employees who render musical service in the band or choir to receive \$2.50 extra each per month.				
All advances in salaries to date from the first of the month next following change in pay or employment unless the same occur on the first of any month.				
Special attendant		35.00		30.00
The designation special attendant shall apply to an attendant who is engaged in performing duty of the character of skilled laborer or who is detailed for some special assignment.				
Bath master		40.00		
Bath mistress				35.00
The designations bath master and bath mistress shall apply to those employees having charge of the hydrotherapeutic departments of their respective buildings.				
Matron			60.00	70.00
Increase of wages of matron from minimum to maximum shall be at the rate of \$2.50 at the end of each six months of continuous service until limit is reached.				
Housekeeper				30.00
The designation housekeeper shall apply to the employee having charge of the nurses' home.				
<i>Kitchen service.</i>				
Chef			60.00	70.00
The designation chef shall apply to the employee having general supervision of the various kitchens of the hospital and their operations.				
Head cook			40.00	50.00
The designation head cook shall apply to the employee having charge of the cooking operations in the main kitchen.				
Cook			25.00	30.00
The designation cook shall apply to those employees having charge of one or several of the smaller or detached kitchens.				
Increase of wages of chef, head cook, and cook from minimum to maximum shall be at the rate of \$2.50 at the end of each six months of continuous service until limit is reached.				
Assistant cook	16.00	20.00	16.00	20.00
The designation assistant cook shall apply to those employees serving on cooking operations in the various kitchens who are under the supervision of those having charge thereof.				
Truckman	20.00	25.00		
The designation truckman shall apply to those employees having charge of the food cars and their operation in the principal kitchens.				
Increase of wages of truckman from minimum to maximum shall be at the rate of \$2.50 for each six months of continuous service until limit is reached.				
<i>Kitchen firemen:</i>				
Main kitchen		35.00		
Other kitchens	20.00	30.00		
Increase of wages of kitchen firemen from minimum to maximum shall be at the rate of \$2.50 at the end of each six months of continuous service until limit is reached.				
Kitchen helpers	14.00	18.00	12.00	16.00
Increase of wages of kitchen helpers—male and female—from minimum to maximum shall be at the rate of \$2 at the end of each six months of continuous service until limit is reached.				

Attendants, nurses, and supervisors—Continued.

Wages per month.	Male.		Female.	
	Minimum.	Maximum.	Minimum.	Maximum.
<i>Bakery.</i>				
Head baker		\$60.00		
Assistant bakers	\$35.00	40.00		
Increase of wages of assistant bakers from minimum to maximum shall be at the rate of \$2.50 at the end of each six months of continuous service until limit is reached.				
<i>Domestic department.</i>				
Waitress			\$14.00	\$16.00
Chambermaid			14.00	16.00
Increase of wages of waitress and chambermaid from minimum to maximum shall be at the rate of \$2 at the end of each six months of continuous service until limit is reached.				
Ward helper			12.00	12.00
The designation "ward helper" shall apply to those employees engaged in merely laborer service, as domestics upon the various wards who are not within the classification of waitress or chambermaid.				
<i>Industrial department.</i>				
Mattress maker		45.00		
Harness maker		30.00		
Forewoman, sewing room				30.00
Forewoman, mending room				30.00
Clothing clerk				30.00
Seamstress			14.00	18.00
Increase of wages of seamstress from minimum to maximum shall be made at the rate of \$2 at the end of each six months of continuous service until limit is reached.				
Storekeeper		125.00		
Assistant storekeeper		60.00		
Steward		100.00		
<i>Laundry department.</i>				
Foreman of laundry		75.00		
Launderer	20.00	30.00		
Laundress			12.00	20.00
Increase of wages of launderer and laundress from minimum to maximum shall be made at the rate of \$2.50 at the end of each six months of continuous service for launderer and at the rate of \$2 at the end of each six months of continuous service for laundress until limit is reached.				
<i>Florist's department.</i>				
Head florist		75.00		
Assistant florists	30.00	35.00		
<i>Farm and garden.</i>				
Head farmer		100.00		
Gardener		58.00		
Foreman, farm		40.00		
Farmer, Godding Croft		40.00		
Teamster	25.00	25.00		
General laborers	25.00	25.00		
<i>Dairy.</i>				
Head dairyman		60.00		
Dairyman	20.00	25.00		
Increase of wages of dairymen from minimum to maximum shall be made at the rate of \$2.50 at the end of each six months of continuous service until limit is reached.				
Poultryman		45.00		
Vineyard keeper		58.00		
Gateman		35.00		
Patrolman		45.00		
Barber		35.00		
<i>Stable department.</i>				
Foreman of stable		55.00		
Hostlers		25.00		
Superintendent buildings and grounds		100.00		

Attendants, nurses, and supervisors—Continued.

Wages per month.	Male.		Female.	
	Minimum.	Maximum.	Minimum.	Maximum.
<i>Construction department.</i>				
Foreman of construction		\$100.00		
Wheelwright		65.00		
Head blacksmith		60.00		
Assistant blacksmith		47.50		
Cabinet carpenter		65.00		
Carpenter		50.00		
Carpenter (per diem), \$3.50 and \$4.00.				
<i>Tin shop.</i>				
Head tinner		70.00		
<i>Plasterers' department.</i>				
Head plasterer		60.00		
Plasterer's laborer		35.00		
<i>Painters' department.</i>				
Foreman		70.00		
Painter		50.00		
<i>Engineer department.</i>				
Chief engineer		150.00		
Assistant engineer, first grade		70.00		
Assistant engineer, second grade		50.00		
Oiler		50.00		
Water tender		45.00		
Fireman		40.00		
Fireman's helper		35.00		
Head plumber		70.00		
Assistant plumber		40.00		
Plumber's helper		35.00		
Head steamfitter		35.00		
Assistant steamfitter	\$45.00	52.50		
Steamfitter helper		35.00		
Electrical engineer				\$100.00
Assistant electrical engineer				75.00
Wireman				60.00
Wireman's helper			\$40.00	40.00
Electrical helper			15.00	15.00
<i>Night watch.</i>				
Chief night watchman				45.00
Assistant night watchman				40.00
Night watchman (stable)				25.00
Night watchman (dairy)				25.00

NOTE.—When, for any reason, an employee is transferred from one department to another department, he shall be paid as if a new employee in the department to which he is transferred at the minimum rate of wage.

The committee (at 12 o'clock m.) took a recess until 2 o'clock p. m.

AFTER RECESS.

The committee reassembled at the expiration of the recess, Mr. Olcott in the chair.

TESTIMONY OF MRS. B. A. MOWER.

Mrs. B. A. MOWER, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. What is your name, please?

Mrs. MOWER. Mrs. B. A. Mower.

The CHAIRMAN. Do you reside here in the city of Washington?

Mrs. MOWER. I do.

The CHAIRMAN. Do you frequently visit St. Elizabeth's?

Mrs. MOWER. Yes.

The CHAIRMAN. Have you been in the habit of visiting there since the 1st of October, 1903?

Mrs. MOWER. Yes; I have. I have a daughter there who has been a patient for over twenty years.

The CHAIRMAN. How often do you go there?

Mrs. MOWER. On an average of once a month; sometimes twice a month.

The CHAIRMAN. In what ward is your daughter?

Mrs. MOWER. She was transferred from Cypress ward—I don't remember just what the building was. I think it is beyond the administration building; the next but one, I think. I can not recall the number.

The CHAIRMAN. Has your daughter a private room in the asylum?

Mrs. MOWER. No; she is in the public room.

The CHAIRMAN. How many others are in the ward she is in?

Mrs. MOWER. Really, I don't know, I am sure; quite a number.

The CHAIRMAN. Do you know how many attendants there are?

Mrs. MOWER. Well, I only know of two.

The CHAIRMAN. Are they nurses?

Mrs. MOWER. No.

The CHAIRMAN. Oh, the regular attendants.

Mrs. MOWER. The regular attendants.

The CHAIRMAN. Are there nurses besides? There are just two attendants?

Mrs. MOWER. Yes; two attendants.

The CHAIRMAN. What can you say in regard to the care your daughter has had, especially considering the time from the 1st of October, 1903?

Mrs. MOWER. Everything has been perfectly satisfactory during the whole twenty years that she has been an inmate there. I never saw her treated unkindly, nor any of the other patients, as far as my personal knowledge is concerned.

The CHAIRMAN. How about the food?

Mrs. MOWER. Why, I have never heard any complaints at all, until I came here in this room, in regard to the food.

The CHAIRMAN. Have you visited your daughter at a time when she has been eating?

Mrs. MOWER. No; at one time when she was ill—I used to go when she was ill; I know she was well cared for and had good, nutritious food.

The CHAIRMAN. Is her physical health good? Besides her mental disturbance, is her physical health good?

Mrs. MOWER. Yes; fairly good. It is all mental. She is perfectly incurable.

The CHAIRMAN. Does she dine with the other patients in the general dining room?

Mrs. MOWER. Why, yes. I imagine she does.

The CHAIRMAN. On this occasion when you say she was ill, was she transferred temporarily to the hospital ward at that time or did she just remain in the ward she was in?

Mrs. MOWER. No; I don't think she was in the hospital ward. I know she was in bed. She had a very nice little room by herself, and I know she was nicely cared for and had good nourishing food.

The CHAIRMAN. Did she at that time have a room by herself when she was ill?

Mrs. MOWER. Well, really I couldn't say whether she had or not.

The CHAIRMAN. How long ago was it when she was ill?

Mrs. MOWER. I can not remember dates, but it was quite a number of months ago. I never can remember dates.

The CHAIRMAN. But it was within the last year?

Mrs. MOWER. Oh, my, yes.

The CHAIRMAN. Was your daughter a pay patient? Do you pay for her care there?

Mrs. MOWER. No; I thought she was entitled to be put there. My husband was——

The CHAIRMAN. Yes. Do not imagine for a moment, Mrs. Mower, that I was criticising you one way or the other. I merely wanted to know whether she is a pay patient or not.

Mrs. MOWER. No, she was not.

Mr. SMYSER. I wish you would just answer what your husband was.

Mrs. MOWER. My husband was a major-general. Major-General Mower—Joseph A. Mower.

The CHAIRMAN. How long has he been dead?

Mrs. MOWER. Thirty-five years.

The CHAIRMAN. Mrs. Mower, did Doctor White ask you to come here and testify?

Mrs. MOWER. Why, no; I don't think he did. I had rather considerable sympathy for the people over there, and I thought that if I could say anything, speak a kind word, I would be very glad to do it.

The CHAIRMAN. Did you go to see Doctor White and tell him you would be glad to come here and testify?

Mrs. MOWER. I don't know that I said that in so many words. I said I thought they were very badly treated over there, according to what I read.

Mr. SMYSER. You did feel that you would like to come and tell what you had witnessed. Is that it?

Mrs. MOWER. I am perfectly willing to, as I say. I have stated all I know.

Mr. SMYSER. Did you feel that it was justice to these people for you to come?

Mrs. MOWER. I certainly did, sir.

The CHAIRMAN. During all this time that your daughter has been an inmate there, you have not had any cause for complaint?

Mrs. MOWER. Not at all. Everything has been perfectly satisfactory.

The CHAIRMAN. Both as to the food and the personal care of the attendants?

Mrs. MOWER. I have had no cause for complaint at all. I would complain if I had cause to. I would be the first one to do it, because I think it is a person's duty if they see anything wrong in an institution like that to do so.

The CHAIRMAN. On these visits that you made, how long did you stay there usually?

Mrs. MOWER. Well, in the summer time I usually go there and spend a great portion of the day with my daughter, and take her out

on the grounds; but in the winter time I am usually there for perhaps two or three hours at a time.

The CHAIRMAN. Is there anything you have observed in regard to the treatment of the other patients than your daughter?

Mrs. MOWER. None at all. Sometimes the patients would be a little bit noisy, and the attendants, I think, always spoke kindly to them, and seemed to be very patient with them. I have never seen any abuse or anything of the kind. As far as I know they have been treated kindly.

The CHAIRMAN. Is your daughter's mind in such a condition that she can talk rationally on some subjects?

Mrs. MOWER. No; not now. She has almost entirely lost her mind. Of course she was in very much better condition several years ago. She has gradually lost her mind, now, almost completely.

The CHAIRMAN. Exactly what is the matter with her? Is there any particular kind of loss of mind? Is there anything they call it, particularly?

Mrs. MOWER. No; she was always extremely nervous, and I don't think she was just right from the time she was born. She was very peculiar, and as she grew older this developed.

The CHAIRMAN. How old is she now?

Mrs. MOWER. Well, she is over 50 years old; I think about 51 or 52.

The CHAIRMAN. Is she quiet, or does her nervousness make her excitable?

Mrs. MOWER. She is very quiet indeed. Within the last few years she has been extremely quiet. She seems to be perfectly passive and very happy, and never gives the attendants any trouble at all.

TESTIMONY OF MISS CARRIE HILL.

Miss CARRIE HILL, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. Miss Hill, are you employed now as a nurse at St. Elizabeth's?

Miss HILL. Yes, sir.

The CHAIRMAN. How long have you been there?

Miss HILL. I have been there two years in May—the 13th of last May.

The CHAIRMAN. Were you appointed by Doctor White?

Miss HILL. Yes, sir.

The CHAIRMAN. Did you have to pass anything in the nature of a civil-service examination?

Miss HILL. Well, I suppose the application that we—

The CHAIRMAN. You are a graduate nurse?

Miss HILL. Well, not yet. We are just taking the examination for nurse. We have not completed the course as yet.

The CHAIRMAN. Who conducted the examination?

Miss HILL. Doctor Clark.

The CHAIRMAN. Had you been in any hospital before you went to St. Elizabeth's?

Miss HILL. No, sir.

The CHAIRMAN. Had you ever been employed as a nurse before that?

Miss HILL. No, sir.

The CHAIRMAN. Do you get a diploma of graduation after you have served a certain length of time in St. Elizabeth's?

Miss HILL. We take a two years' course there.

The CHAIRMAN. You take a two years' course?

Miss HILL. Yes, sir.

The CHAIRMAN. So that you are a student as well as a nurse, are you?

Miss HILL. Yes, sir.

The CHAIRMAN. And at the end of the two years are you examined as the nurses are in other institutions?

Miss HILL. We have an examination, and we get a diploma.

The CHAIRMAN. And upon that the diploma is issued that makes you a graduated nurse?

Miss HILL. Yes, sir.

The CHAIRMAN. What part of the hospital are you stationed in?

Miss HILL. At the present time I am on night duty; but I have only been on night duty two weeks. Before that I was on a hospital ward.

The CHAIRMAN. Before that you were on a hospital ward?

Miss HILL. Yes, sir.

The CHAIRMAN. Consequently your care is with patients who are not only mentally defective, but who are physically defective?

Miss HILL. Yes, sir.

The CHAIRMAN. And who have a disease of some kind?

Miss HILL. Yes, sir.

The CHAIRMAN. How many patients are in the ward in which you are?

Miss HILL. Twenty-six.

The CHAIRMAN. How many attendants are there?

Miss HILL. We have 4 nurses.

The CHAIRMAN. Four?

Miss HILL. Yes, sir.

The CHAIRMAN. Are there 2 always on duty in the daytime?

Miss HILL. Well, there are 4 on duty from 6 in the morning until 5 in the evening every other day, and then there are 2 from 5 until 8, and two on night duty from 8 in the evening until 6 in the morning.

The CHAIRMAN. Are there 2 always on night duty?

Miss HILL. Yes, sir.

Mr. SMYSER. That is, in addition to the 4?

Miss HILL. Yes, sir.

The CHAIRMAN. So that there are 6 altogether in that ward?

Miss HILL. Six altogether; and 4 in the day.

The CHAIRMAN. Four having charge in the daytime and 2 at night?

Miss HILL. Yes, sir.

The CHAIRMAN. Did you know a Mrs. Lochte?

Miss HILL. Yes, sir.

The CHAIRMAN. When was she a patient there?

Miss HILL. Well, last summer. I was not on a ward when she was admitted; but I went back to the ward about ten days after, I think, the best I can remember, and I was there from that time until she went home on parole.

The CHAIRMAN. What was the matter with her? Why was she in the hospital ward; do you know, or do you remember?

Miss HILL. At that time I was not employed in the hospital ward. I was on the receiving ward. This hospital ward was the last ward I was on before I was on night duty. I was there three months. I went there in February, and before that I was on the receiving ward, and was there last summer when he was there.

The CHAIRMAN. Do you know how long she was kept in the receiving ward?

Miss HILL. She was kept in the receiving ward from the time she was admitted until she went home.

The CHAIRMAN. She was in the receiving ward all the time?

Miss HILL. Yes, sir.

Mr. HAY. She went there in June. The reference to that matter appears on page 139, volume 3, of the testimony.

The CHAIRMAN. Do you remember Mrs. Lochte?

Miss HILL. Yes, sir; I remember her.

The CHAIRMAN. What sort of a patient was she?

Miss HILL. Well——

The CHAIRMAN. Was her trouble nervous trouble largely? That is what I want to get at; whether she was a nervous patient or whether she was a quiet one, or what.

Miss HILL. Well, of course, she was nervous, and she was disturbed at times, too. She was obstinate. She didn't seem to want to do anything she was told to do, or that would be of any benefit to her.

The CHAIRMAN. Do you mean that she would not eat? Do you mean anything of that kind?

Miss HILL. No. While I was on the ward her appetite seemed to be pretty good and she ate all right, but I did not go to the ward until about ten days after she was admitted there.

The CHAIRMAN. What kind of things would she decline to do or omit doing when she was told to do them?

Miss HILL. One special thing would be on bath days.

The CHAIRMAN. Yes. You mean that she objected to taking her baths?

Miss HILL. Yes, sir; and she objected to being cared for. She wanted to do everything herself, and she did not do it correctly. She did not want the nurses to care for her in any way.

The CHAIRMAN. She did not want an attendant with her while she was bathing?

Miss HILL. No, sir.

The CHAIRMAN. Was the shower system used there?

Miss HILL. Yes, sir.

The CHAIRMAN. Or was the tub system used?

Miss HILL. At that time we had the shower and the tub too.

The CHAIRMAN. Which were you in the habit of giving her?

Miss HILL. Well, she generally used the tub, because she preferred that. Then we could get her to take a bath easier in the tub than we could in the shower. We were supposed to use the shower baths.

The CHAIRMAN. How often did you give her these baths?

Miss HILL. Once a week.

The CHAIRMAN. The baths were not given as part of her treatment, were they?

Miss HILL. No, indeed.

The CHAIRMAN. It was just regular bathing?

Miss HILL. Regular bathing day.

The CHAIRMAN. Did you have to use force with her sometimes to make her bathe?

Miss HILL. Well, I don't remember of ever using force with her but once to have her bathe on bathing day. One afternoon—the supervisor was present at that time, and we just took her down and bathed her.

The CHAIRMAN. Who was the supervisor?

Miss HILL. The supervisor was Miss Fitzpatrick.

The CHAIRMAN. And then some force was necessary to make her bathe?

Miss HILL. Some.

The CHAIRMAN. In what way was the force used?

Miss HILL. We just had to take hold of her and take her down and have her undressed——

Mr. SMYSER. Did you drag her down?

Miss HILL. No, sir; we didn't have to drag her. We just took hold of her, one nurse on one side and one on the other.

The CHAIRMAN. Was she able to undress herself?

Miss HILL. Yes; but she struggled. She wouldn't have her clothes taken off. She wouldn't take them off herself and she didn't want us to take them off.

The CHAIRMAN. Did she give any reason for not wanting to do this?

Miss HILL. I don't remember. The reason was that she didn't want to take the bath.

The CHAIRMAN. Was she in such a condition that she could have, with safety to herself, taken a bath without an attendant?

Miss HILL. I don't know whether she had been considered that way or not.

The CHAIRMAN. Do any of the patients ever take baths without an attendant being present?

Miss HILL. Well, the patients are always supposed to have a nurse in the bathroom when they were taking a bath—every patient.

The CHAIRMAN. The usual way is for an attendant to be in the bathroom with the patient when the patient takes a bath?

Miss HILL. The usual way is for an attendant to be in the bathroom.

The CHAIRMAN. But only one patient is bathed at a time?

Miss HILL. Only one patient is bathed at a time.

The CHAIRMAN. Did you ever have any other difficulty with Miss Lochte?

Miss HILL. Yes; I recall one Sunday afternoon when they had some difficulty in bringing her in off of the veranda. She had company. Her husband brought her in, and when he started to leave she wanted to go with him. He would not let her go, and she was very excited. He could not get away from her. She held on to him. He broke her hold, and we took hold of her and held her until he got outside of the door. Then he went on, but she stood at the door, and after a while she was down to the bathroom, and she brought a tumbler out, and I thought she was going to strike some one with it. I asked her to give it to me, and she would not do it. Then I let her alone. She

pounded on the screen door and burst the screen out of it, and then we took the glass from her.

The CHAIRMAN. You never used any more force with her than was necessary?

Miss HILL. No more than was necessary.

The CHAIRMAN. Was she ever struck by anyone?

Miss HILL. I do not understand that.

The CHAIRMAN. I say, was she ever struck by anyone?

Miss HILL. Was she? I do not remember of her being struck by anyone. I do not recall it.

The CHAIRMAN. You never struck her, and you never saw her struck?

Miss HILL. No, sir.

The CHAIRMAN. Did you ever see anything like ill treatment of any patient in the hospital?

Miss HILL. No, sir; I have never seen ill treatment since I have been in the hospital.

The CHAIRMAN. Are most of the patients in the hospital mild and tractable?

Miss HILL. Well, not all of them are mild, of course.

The CHAIRMAN. Do you ever have any serious difficulty with any of them in making them do what the doctors tell them they must do? I mean in regard to taking medicine, or food, or bathing? Is it the customary thing for you to have any difficulty with patients?

Miss HILL. Well, of course, sometimes we do; but it does not happen very often. Sometimes we have to use force in giving them food and different things.

The CHAIRMAN. Is it necessary, with any patient at any time, to tie them in bed?

Miss HILL. No, sir; I have never seen any tied in bed. I have, on the hospital ward, had a sheet across the bed to stop the patient from rolling out on the side.

The CHAIRMAN. How was that done?

Miss HILL. On one occasion——

The CHAIRMAN. How was that done?

Miss HILL. The sheet was just tied to one side of the bed and run right across and tied on the other side to the corners of it.

The CHAIRMAN. Is that to prevent the patient from rolling out of bed?

Miss HILL. To prevent the patient from rolling out.

The CHAIRMAN. Was there any cruelty about that? Was the patient hurt in any way by having that sheet tied in that way?

Miss HILL. No, sir; it was not tied tight enough to hurt or to do the patient any harm in any way.

The CHAIRMAN. This sheet was just the regular sheet that was always on the bed?

Miss HILL. Just the regular sheet that we used to make the beds.

The CHAIRMAN. A patient tied in that way had——

Miss HILL. A patient tied in that way had access to roll from one side of the bed to the other if he wanted to.

The CHAIRMAN. The patient was clad in proper night garments, was he not?

Miss HILL. Yes, sir.

The CHAIRMAN. You say you only had to do that on one occasion?

Miss HILL. On one occasion—that is, since I have been on the hospital ward.

Mr. HAY. Did you ever do it before you went on the hospital ward?

Miss HILL. No, sir.

The CHAIRMAN. How is the food in the hospital?

Miss HILL. The food on the hospital ward—the ward that I worked on—that was fairly good. On the receiving ward it was about the same it was there—the first ward I was in.

The CHAIRMAN. Is the food that the patients have about the same that you have—that is, is it about the same as that the nurses have—about the same food?

Miss HILL. Sometimes it is about the same, and sometimes, of course, there is a difference.

The CHAIRMAN. Is the food that you nurses have sometimes better than the food that the patients have, do you think?

Miss HILL. Sometimes it is, and sometimes I consider that it is not any better, or it is not as good, possibly. On the hospital wards sometimes we have extra things that we did not have for the sick patients.

The CHAIRMAN. How is the butter?

Miss HILL. The butter is not very good. It is oleomargarine.

Mr. SMYSER. How is the oleomargarine? Is it good?

Miss HILL. It is not good.

Mr. SMYSER. I mean it is not good as compared with butter?

Miss HILL. No, sir.

Mr. SMYSER. But is it good oleomargarine? You are like me. You draw a distinction between oleomargarine and butter, don't you?

Miss HILL. Yes, sir. There is a great deal of difference; I think so.

Mr. SMYSER. That is right. So do I.

The CHAIRMAN. Where did you live before you went to the hospital?

Miss HILL. I lived in Maryland, in St. Mary County.

The CHAIRMAN. You lived in the country?

Miss HILL. Yes, sir.

The CHAIRMAN. Is there any other particular complaint that you would make in regard to the food that is served, either to you or to any of the patients?

Miss HILL. Well, I don't know. I think there could be some improvement on the food, especially in the cooking. I think the food would be better if it was more properly cooked.

The CHAIRMAN. Do you mean that the meat is overdone, or underdone, or what?

Miss HILL. Sometimes it is both ways.

The CHAIRMAN. The food, I suppose, varies from one time to another?

Miss HILL. Oh, yes. Of course some meals are better than some others.

The CHAIRMAN. How about the vegetables—the potatoes, for instance? Are the potatoes nicely served?

Miss HILL. Sometimes they are, and sometimes they are not.

The CHAIRMAN. You mean that sometimes they are not cooked enough?

Miss HILL. Sometimes they are not cooked enough, and sometimes they seem to taste better than they do at others. I don't know what is the cause.

Mr. SMYSER. Was that due to the cooking or to the material, the potato itself?

Miss HILL. I don't know.

Mr. SMYSER. You can cook, can you not? You know how to cook, do you not?

Miss HILL. Some little.

Mr. SMYSER. Now, what is the trouble with these potatoes? We all know that you can not always have potatoes alike, even in an ordinary household.

Miss HILL. Well, of course, a great many times it is due to the cooking, as I said.

The CHAIRMAN. Have you ever made any complaint of the food to anyone?

Miss HILL. No, sir.

The CHAIRMAN. You never talked with the supervisor of the ward about it?

Miss HILL. No, sir; I don't know that I did. When I was on the receiving ward I spoke to Miss Fitzpatrick a couple of times, sometimes, about things that were not served just right, and I think she complained about it.

The CHAIRMAN. Was there a change for the better after you had complained at all?

Miss HILL. Well, sometimes there were.

The CHAIRMAN. Was there ever any trouble about the quantity of the food? Did the patients have enough to eat?

Miss HILL. When I was on the receiving ward, many times we did not, and we would send back and get more. If we didn't have enough we would send back to the kitchen for more, and if they had it we would get it; sometimes we would not, if they did not have it.

Mr. HAY. Are you speaking now of what you got for yourself or what you got for the patients?

Miss HILL. For the patients.

The CHAIRMAN. Did the same condition of affairs exist in regard to what you got yourselves, too?

Miss HILL. We, as a usual thing, got enough to go around.

The CHAIRMAN. What time do the patients take their meals in the receiving ward?

Miss HILL. About half past 7.

The CHAIRMAN. That is the breakfast?

Miss HILL. Yes.

The CHAIRMAN. What time do they take dinner?

Miss HILL. The dinner comes up about half past 11. We have it to serve, and the patients get in about quarter of 12.

The CHAIRMAN. Can you keep it warm that length of time?

Miss HILL. Everything does not stay warm, of course, but we always have to serve it before the patients come in.

The CHAIRMAN. What time do they have the evening meal?

Miss HILL. About half past 4—between half past 4 and 5.

The CHAIRMAN. What time do you nurses have your meals?

Miss HILL. We get breakfast about 8 o'clock or something after 8.

The CHAIRMAN. You have it after the patients have theirs?

Miss HILL. Yes, sir; the patients come first, and then we have ours. We have dinner something after 12, or half past 12, and supper at 5 o'clock or after.

The CHAIRMAN. What do you usually have for supper for the patients? I do not mean on the hospital ward, but what do the patients in the receiving ward usually have for supper?

Miss HILL. Well, when I was on the receiving ward they always had meat of some kind for supper, and potatoes, bread, and tea, and butter, as it was called, and apple sauce, possibly, or peaches, or something of that kind.

The CHAIRMAN. Did they have meat also at dinner in the middle of the day?

Miss HILL. Yes, sir; on the receiving ward they had meat three times a day.

The CHAIRMAN. Have you had any cause for complaint recently in regard to the food?

Miss HILL. No, sir; I have not, not particularly.

The CHAIRMAN. Is it better in the hospital wards than it was in the receiving ward?

Miss HILL. Well, at times I think there might be a little difference, but no so very much. I think the food for the patients in the hospital wards may be a little bit better at times than in the receiving ward.

The CHAIRMAN. The patients in the hospital ward, I suppose, frequently have special meals ordered for them, do they not?

Miss HILL. Some of them do; yes, sir.

The CHAIRMAN. Is there ever any complaint made of those special meals? Are those meals generally good or otherwise?

Miss HILL. Well, I don't—

The CHAIRMAN. I mean judging from the appearance. I understand it is the patients who eat the food, but I mean judging from the appearance.

Mr. SMYSER. How does it look?

The CHAIRMAN. Yes; how does it look?

Miss HILL. You mean the patients that get special meals on the hospital ward?

The CHAIRMAN. Yes. Is that served on a separate tray entirely?

Miss HILL. When it is ordered specially it is served on separate trays. They all get separate trays.

The CHAIRMAN. These patients who get special diet—does that food look nice when it comes up?

Miss HILL. Yes; it looks all right.

Mr. HAY. How long have you been there?

Miss HILL. Two years.

Mr. HAY. What pay did you receive when you first went there?

Miss HILL. Fourteen dollars a month.

Mr. HAY. How much do you receive now?

Miss HILL. Twenty dollars.

Mr. HAY. When did you have your pay increased?

Miss HILL. Sir?

Mr. HAY. When did you have your pay increased?

Miss HILL. Two months ago.

The CHAIRMAN. Had it been \$14 up to two months ago?

Miss HILL. Oh, no.

Mr. HAY. You got an increase how soon after you went there?

Miss HILL. When I first went in the hospital I worked for four months in the dining room. Then I went on the ward and worked six months for \$15 a month, then six months for \$17.50 a month, and then two months for \$20 a month.

Mr. HAY. What duties do you have to perform outside of the ward?

Miss HILL. Outside of the ward?

Mr. HAY. What do you have to do all day, from the time you go on duty until you go off? Do you just look after patients?

Miss HILL. We have to look after patients, and the ward also. We have to keep the ward clean and keep everything clean.

Mr. HAY. And arrange the beds and all that kind of thing?

Miss HILL. Yes, sir.

Mr. SMYSER. Miss Hill, do you know anything about Mrs. Lochte being fed with a tube?

Miss HILL. No, sir; I was not on the ward, and if she was fed with a tube I don't know anything about it.

Mr. SMYSER. You never saw it?

Miss HILL. No, sir.

Mr. SMYSER. Did you ever see any patients fed in that way?

Miss HILL. Yes, sir.

The CHAIRMAN. What sort of a tube is it?

Miss HILL. It is rubber—I suppose it is rubber.

Mr. SMYSER. How long is it?

Miss HILL. Well, I couldn't tell you exactly how long it is.

Mr. SMYSER. I know you young ladies are poor on distance. Is it 18 or 20 inches, or something like that?

Miss HILL. I guess it is more than that.

Mr. SMYSER. More than that?

Miss HILL. Yes, sir.

Mr. SMYSER. It is rubber?

Miss HILL. Rubber.

Mr. SMYSER. Did you ever see a glass tube out there used for that purpose?

Miss HILL. For tube feeding?

Mr. SMYSER. Yes.

Miss HILL. No, sir.

Mr. SMYSER. Or a metal tube?

Miss HILL. No, sir.

Mr. SMYSER. Could either a glass or a metal tube be used for that purpose?

Miss HILL. I don't think a glass tube could, nor a metal tube, unless it could be bent, I suppose.

Mr. HAY. Do they not put a small glass tube inside of the other tube?

Miss HILL. No, sir.

Mr. HAY. They do not?

Miss HILL. No, sir.

Mr. HAY. I do not mean all the way down, you know.

Miss HILL. You mean that part of the tube that the milk goes in?

Mr. HAY. Yes.

Miss HILL. That has a funnel, a kind of a funnel fixed right into the end of the tube.

Mr. HAY. The end of the tube that is on the outside?

Miss HILL. Yes, sir.

The CHAIRMAN. Sometimes that funnel is made of rubber and sometimes of glass, I suppose.

Miss HILL. I have never seen a glass one. I don't know whether it is rubber or what, but it is hard.

The CHAIRMAN. Is the funnel usually attached to the tube itself?

Miss HILL. Yes, sir.

The CHAIRMAN. It is all a part of the same thing?

Miss HILL. Yes, sir.

Mr. HAY. I suppose the upper part does not go down into the nose or mouth?

Miss HILL. No, indeed.

Mr. SMYSER. Do you know anything of an occasion over there when Mrs. Lochte had a towel put around her neck?

Miss HILL. No, sir.

Mr. SMYSER. And twisted?

Miss HILL. No, sir.

Mr. SMYSER. Do you know anything about that?

Miss HILL. No, sir; I do not.

The CHAIRMAN. Did you ever hear of any such thing?

Miss HILL. No, sir; I never heard of it, nor I never saw anything of the kind done.

Mr. SMYSER. There is some inmate over there described during the time Mrs. Lochte was an inmate as a little short woman. Do you know anything about, or do you have in mind, such a patient as that little short woman being taken by the hair and dragged and her face blacked?

Miss HILL. No, sir; I don't remember anything of the kind.

Mr. SMYSER. Did you hear of any such incident?

Miss HILL. No, sir; not while I was on that ward I didn't hear of anything of the kind.

Mr. SMYSER. Did you hear of such an occurrence before you got to that ward?

Miss HILL. No, sir.

Mr. SMYSER. I do not know how it is over there, but when incidents of that kind occur, if they do occur, does it travel around the institution? Do the attendants get to know of it?

Miss HILL. What is that?

Mr. SMYSER. Do the attendants get to know of it, if there is trouble with a patient?

Miss HILL. Well, occasionally they do, I suppose. Possibly one girl tells another if they happen to have trouble with a patient.

Mr. SMYSER. But the instance to which I have called attention you never heard mentioned?

Miss HILL. No, sir; I never heard that mentioned at all.

The CHAIRMAN. Do you know of any patient whatever in your ward, or in any other place, or did you ever see a patient being treated badly with a towel—choked with a towel in any way?

Miss HILL. No, sir.

The CHAIRMAN. You never heard of such an occurrence?

Miss HILL. No, sir.

The CHAIRMAN. And you never saw it?

Miss HILL. No, sir.

Mr. SMYSER. Your wages have been increased according to a regular scale over there?

Miss HILL. Yes, sir.

TESTIMONY OF MISS ORA OMAHUNDRA.

Miss ORA OMAHUNDRA, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. What is your name, please?

Miss OMAHUNDRA. My name is Ora Omahundra.

The CHAIRMAN. You are at present a nurse in St. Elizabeth's?

Miss OMAHUNDRA. Yes, sir.

The CHAIRMAN. How long have you been employed there as a nurse?

Miss OMAHUNDRA. Eight years and eleven months.

The CHAIRMAN. Where did you live before you went there?

Miss OMAHUNDRA. Virginia.

The CHAIRMAN. By whom were you appointed?

Miss OMAHUNDRA. Doctor Godding was the superintendent.

The CHAIRMAN. Have you taken a diploma from the hospital as a nurse?

Miss OMAHUNDRA. Yes, sir.

The CHAIRMAN. How long ago did you do that?

Miss OMAHUNDRA. In 1902.

The CHAIRMAN. What are your wages now?

Miss OMAHUNDRA. Thirty-five dollars a month.

The CHAIRMAN. What were they when you first went there?

Miss OMAHUNDRA. Fourteen dollars a month.

The CHAIRMAN. When was your first increase in wages?

Miss OMAHUNDRA. The seven months that I had been there.

The CHAIRMAN. How much did they raise your wages then?

Miss OMAHUNDRA. To \$16.

The CHAIRMAN. Then what was the next raise?

Miss OMAHUNDRA. The next six months it was \$18.

The CHAIRMAN. And after that?

Miss OMAHUNDRA. It was raised to \$20; and I did not get another raise until I was given charge of a ward. Then I got \$25.

The CHAIRMAN. What ward are you in charge of now?

Miss OMAHUNDRA. In Q building, ward 2.

The CHAIRMAN. Is that the same ward?

Miss OMAHUNDRA. No.

The CHAIRMAN. That is not a hospital ward?

Miss OMAHUNDRA. No.

The CHAIRMAN. How many patients are there in that ward?

Miss OMAHUNDRA. Thirty.

The CHAIRMAN. How many nurses are there there?

Miss OMAHUNDRA. Two.

The CHAIRMAN. Two besides yourself?

Miss OMAHUNDRA. No; two with myself.

The CHAIRMAN. But you are the head nurse of that ward?

Miss OMAHUNDRA. Yes, sir.

The CHAIRMAN. You are in charge of that ward?

Miss OMAHUNDRA. Yes, sir.

The CHAIRMAN. Are there any other attendants connected with that ward other than nurses?

Miss OMAHUNDRA. No, sir.

The CHAIRMAN. Is there not an additional attendant for night work?

MISS OMAHUNDRA. Yes; there is an additional one for night.

THE CHAIRMAN. There is one for the night?

MISS OMAHUNDRA. Yes; and two for the day.

THE CHAIRMAN. So there are three altogether connected with that ward?

MISS OMAHUNDRA. There are three connected with that ward; yes.

THE CHAIRMAN. Two of whom are on duty in the day and one at night?

MISS OMAHUNDRA. Yes, sir.

THE CHAIRMAN. Have you charge over the night nurse as well as the other day nurse?

MISS OMAHUNDRA. No.

THE CHAIRMAN. You have nothing to do with the night nurse?

MISS OMAHUNDRA. I have nothing to do with the night nurse.

THE CHAIRMAN. Are any of your patients violently insane?

MISS OMAHUNDRA. Yes, sir; the most of them are.

THE CHAIRMAN. Most of them are?

MISS OMAHUNDRA. Yes.

THE CHAIRMAN. Do you have to restrain them frequently?

MISS OMAHUNDRA. No; not frequently. Occasionally it is necessary.

THE CHAIRMAN. How do you do it when you do have to restrain them?

MISS OMAHUNDRA. Why, the only restraint that is used is what we call a camisole, a kind of a waist.

THE CHAIRMAN. A camisole is a canvas jacket with long sleeves, is it not?

MISS OMAHUNDRA. Yes.

THE CHAIRMAN. That laces up behind, and the sleeves are tied in the back?

MISS OMAHUNDRA. Yes.

THE CHAIRMAN. When you put that camisole on patients does it hurt them physically?

MISS OMAHUNDRA. No; I don't think it does.

THE CHAIRMAN. Is there any play at all of their hands and arms when that is on?

MISS OMAHUNDRA. Oh, yes; they can move their arms, and they can move their hands.

THE CHAIRMAN. Why do you put that on, Miss Omahundra?

MISS OMAHUNDRA. When they are so much disturbed that we can not quiet them in any other way, and they would strike other patients.

THE CHAIRMAN. Do they ever attempt to strike other patients or to interfere with other patients?

MISS OMAHUNDRA. Yes; they do; some of them.

THE CHAIRMAN. Do they ever attack the attendants? Do they attack you as one of the nurses?

MISS OMAHUNDRA. Yes; they have struck me.

THE CHAIRMAN. Do you put the camisole on under the direction of a doctor, or would you do it yourself without being told to do so by a doctor?

MISS OMAHUNDRA. We never do it without an order from a doctor.

THE CHAIRMAN. Who is the doctor who has supervision of that on your ward?

MISS OMAHUNDRA. Doctor O'Malley.

The CHAIRMAN. She is a lady doctor?

Miss OMAHUNDRA. Yes.

The CHAIRMAN. Unless you get directions from her to put this camisole on, you do not use it?

Miss OMAHUNDRA. No; we would not use it without her order.

The CHAIRMAN. Did you ever have any serious trouble with any patient?

Miss OMAHUNDRA. No.

The CHAIRMAN. But you say a patient struck you at one time, or you have been struck by a patient.

Miss OMAHUNDRA. Yes; but it never left any permanent injury. They have struck me.

The CHAIRMAN. I wish you would describe the occasion that you remember that a patient struck you, and tell us what the reason for it was, if you know.

Miss OMAHUNDRA. Well, I don't know that I can recall just the day, but about two weeks ago, when one of my patients was very much disturbed. She did not strike me first, but she struck one of the other patients, and I went to her to catch her hands to stop her, and she turned and struck me, and she pulled my hair, too.

The CHAIRMAN. How did you succeed in quieting her?

Miss OMAHUNDRA. I had to hold her on and get the other nurse; and that was an occasion when this camisole waist was put on her.

The CHAIRMAN. You sent for Doctor O'Malley?

Miss OMAHUNDRA. I had the other nurse telephone for the doctor.

The CHAIRMAN. And did Doctor O'Malley come?

Miss OMAHUNDRA. No; she gave us permission to put the camisole on.

The CHAIRMAN. Over the telephone?

Miss OMAHUNDRA. Yes; she did not come.

Mr. SMYSER. Was that right and proper under the circumstances?

Miss OMAHUNDRA. I think so.

The CHAIRMAN. In other words, you think the patient might have done you serious injury if it had not been done?

Miss OMAHUNDRA. I do.

The CHAIRMAN. How long did you have to keep that on this patient?

Miss OMAHUNDRA. Well, on that occasion we kept it on three hours.

The CHAIRMAN. Three hours?

Miss OMAHUNDRA. Yes.

The CHAIRMAN. Did you ever know of the jacket being kept on for a greater length of time than that?

Miss OMAHUNDRA. Well, not recently.

The CHAIRMAN. How recently?

Miss OMAHUNDRA. Well, in fact, there has not been very much restraint used in the last three or four years—not as much as what it used to be.

The CHAIRMAN. You mean that it is now an unusual occurrence to put this thing on?

Miss OMAHUNDRA. Yes; I mean it is an unusual occurrence.

The CHAIRMAN. In the last three years what is the greatest length of time you have known one of these jackets to be kept on a patient?

Miss OMAHUNDRA. Not longer than three or four hours. They usually get quiet in that time.

The CHAIRMAN. Does it have a quieting effect on them?

MISS OMAHUNDRA. Why, yes; they seem to get quiet after they have it on a while.

The CHAIRMAN. Do they usually show any resentment after the jacket is taken off?

MISS OMAHUNDRA. No; I have never known them to.

The CHAIRMAN. Is it a very difficult thing to put one of these jackets on? Do they struggle very much about it?

MISS OMAHUNDRA. No; not a great deal.

Mr. SMYSER. If a patient was disturbed so that you would notice that there was not that restoration of calmness in four or five or six hours, would you regard it as improper to keep the restraint on until the excitement passed away in a measure?

MISS OMAHUNDRA. Well, I don't remember that it was ever necessary to keep it on that long.

Mr. SMYSER. I know, but, Miss Omahundra, this is what I am trying to get at: It has so happened that you never have been required to keep it on, but suppose a patient there became violently excited, and you would have to restrain her by resorting to the camisole, and the excitement would continue, say, for six, eight, or even ten hours, would you regard it as improper to restrain her that length of time by the use of the camisole?

MISS OMAHUNDRA. I would.

Mr. SMYSER. You would?

MISS OMAHUNDRA. I would. I think it would be too long for it.

Mr. SMYSER. You would take it off and control the patient in another way?

MISS OMAHUNDRA. Yes.

The CHAIRMAN. Would you do that by resorting to chemicals?

MISS OMAHUNDRA. I don't know. It has never been necessary. I have never known one to be violently disturbed that long.

Mr. SMYSER. I understand. Is this what you aim at—to keep the restraint on as short a period as possible?

MISS OMAHUNDRA. Yes; that is what we aim at.

The CHAIRMAN. Putting these jackets on is done almost every day, is it?

MISS OMAHUNDRA. Oh, no.

The CHAIRMAN. It is not? You do not have any necessity for doing it every day?

MISS OMAHUNDRA. No.

The CHAIRMAN. Did you ever see any of the patients struck in your ward by any of the nurses or attendants?

MISS OMAHUNDRA. No, sir; I never have.

The CHAIRMAN. When you have to restrain them you merely hold their arms and call for additional assistance?

MISS OMAHUNDRA. Yes.

The CHAIRMAN. Do the patients assist you to control other patients?

MISS OMAHUNDRA. Not on the ward I have charge of now.

The CHAIRMAN. Have you ever known that to be done? Does that often happen?

MISS OMAHUNDRA. No; I have never had a patient to assist me in managing another patient.

The CHAIRMAN. Did you ever have more than one patient attack you at a time?

Miss OMAHUNDRA. No.

The CHAIRMAN. Did you know Mrs. Lochte?

Miss OMAHUNDRA. Well, I have seen her.

The CHAIRMAN. Were you ever in any ward where she was?

Miss OMAHUNDRA. I never worked on a ward with her.

The CHAIRMAN. You do not know anything about her of your own knowledge, in regard to what condition she was in?

Miss OMAHUNDRA. No.

The CHAIRMAN. You never had anything to do with bathing or feeding her?

Miss OMAHUNDRA. I assisted to put her once in a wet sheet pack.

The CHAIRMAN. What is that, "a wet sheet pack?" What do you mean by that? Is that done after she has done her bath?

Miss OMAHUNDRA. No. She was very much disturbed.

The CHAIRMAN. Yes; just describe how you did it. I want to know just exactly what a wet-sheet pack is.

Miss OMAHUNDRA. The sheets are wrung out of water and spread on the bed and the patient is laid on the sheet, and the sheets are wrapped around her, and then the blankets are wrapped over the sheets.

Mr. SMYSER. Go on.

The CHAIRMAN. How long are they left there?

Miss OMAHUNDRA. That depends on the order we have from the doctor.

The CHAIRMAN. In other words, you do that after you get orders from a physician to do it?

Miss OMAHUNDRA. Why, the packs are always ordered by the physician, and the length of time they should be left in the pack.

The CHAIRMAN. In other words, you merely carry out the instructions of the physician in putting on this pack?

Miss OMAHUNDRA. That was all. I carried out the instructions.

The CHAIRMAN. You would not do it of your own idea?

Miss OMAHUNDRA. Oh, no.

The CHAIRMAN. Unless it was ordered?

Miss OMAHUNDRA. No.

The CHAIRMAN. Does that hurt the patient in any way?

Miss OMAHUNDRA. No. It seems to have a soothing effect on them. They generally fall asleep after they have been in the pack a few minutes. I have known them to sleep an hour or more.

The CHAIRMAN. How long are they usually left in the pack?

Miss OMAHUNDRA. Well, when they are first put in the pack they do not usually leave them in more than an hour or an hour and a half. If they take the packs regularly I believe they are left in a little longer.

The CHAIRMAN. Do the patients seem to like it, or to dislike it?

Miss OMAHUNDRA. Yes; they do like it—they seem to like the pack.

The CHAIRMAN. And the sheets are just the usual sheets that go on the bed, are they not?

Miss OMAHUNDRA. Yes.

The CHAIRMAN. And the blankets are soft blankets?

Miss OMAHUNDRA. Oh, yes; the same that are used on the beds.

The CHAIRMAN. And the only thing you know with reference to Mrs. Lochte is the one time when you assisted another attendant in putting her in this pack?

Miss OMAHUNDRA. Yes.

The CHAIRMAN. Is it always necessary for two attendants to do this?

Miss OMAHUNDRA. Well, there is usually two there.

The CHAIRMAN. Why are there usually two?

Miss OMAHUNDRA. Because we don't know, of course, what might happen with insane people, and we think it is safer to have two.

The CHAIRMAN. You can get them covered up more quickly, anyway, with two?

Miss OMAHUNDRA. Certainly, it is much easier when you have help than it is alone.

The CHAIRMAN. At this time, when you assisted in doing this to Mrs. Lochte, was she violent?

Miss OMAHUNDRA. I understood that she had been before we put her in the pack. We did not have any trouble to put her in the pack though.

The CHAIRMAN. Do you understand that this is done as a part of the treatment of people who are mentally deranged?

Miss OMAHUNDRA. Yes.

The CHAIRMAN. It has nothing in the way of punishment connected with it?

Miss OMAHUNDRA. Oh, no.

The CHAIRMAN. What do you know about the food in the institution?

Miss OMAHUNDRA. Why, I don't know. In my opinion, the food is generally very good.

The CHAIRMAN. Is there enough of it?

Miss OMAHUNDRA. Yes; we always have a plenty.

The CHAIRMAN. What do you think of the butter?

Miss OMAHUNDRA. Well, the butter is not——

Mr. SMYSER. Is it butter?

Miss OMAHUNDRA. I would not call it butter.

Mr. SMYSER. That is right.

The CHAIRMAN. Were you raised in the country?

Miss OMAHUNDRA. I was.

The CHAIRMAN. You know what good butter is?

Miss OMAHUNDRA. I think I do.

Mr. SMYSER. This is not the kind mother used to make, is it?

Miss OMAHUNDRA. No; I never saw any like that at home.

The CHAIRMAN. Have you ever made any complaint of the food or anything else in connection with the hospital?

Miss OMAHUNDRA. No.

The CHAIRMAN. Whose duty is it to clean the rooms and make the beds? Do you nurses take care of all that?

Miss OMAHUNDRA. On the ward, you mean?

The CHAIRMAN. Yes.

Miss OMAHUNDRA. Yes.

The CHAIRMAN. You have to clean the rooms and make the beds?

Miss OMAHUNDRA. Certainly.

The CHAIRMAN. Do the patients assist you at all in doing that?

Miss OMAHUNDRA. Some few of them assist sometimes.

The CHAIRMAN. When they do it, do they give that assistance regularly, or only once in a while?

Miss OMAHUNDRA. No; they don't assist regularly.

The CHAIRMAN. Do you force them to assist, or do they do it voluntarily?

Miss OMAHUNDRA. They do it voluntarily.

The CHAIRMAN. How often does Doctor White come through your ward?

Miss OMAHUNDRA. Well, I don't know. He has no regular time for visiting the ward.

Mr. HAY. How often has he been through there during the last year, as far as you know?

Miss OMAHUNDRA. Well, I don't know.

The CHAIRMAN. Has he been through every day?

Miss OMAHUNDRA. No, he has not come through every day.

Mr. HAY. Every week?

Miss OMAHUNDRA. He does not come very often. I could not say that he comes every week.

Mr. HAY. Every two weeks?

Miss OMAHUNDRA. Well, not on an average of every two weeks.

Mr. HAY. How often have you seen the board of visitors in your ward?

Miss OMAHUNDRA. Well, I have not seen the board of visitors for some time. In fact, I have not seen the board of visitors through my ward but twice that I can recall.

Mr. HAY. Since you have been in the institution?

Miss OMAHUNDRA. Yes. I have seen perhaps one member, but not more than one at a time.

Mr. HAY. How often would he go through your ward?

Miss OMAHUNDRA. Well, not very often.

Mr. HAY. Would he go through every year?

Miss OMAHUNDRA. Well, the member I speak of is Mrs. Gangewer.

Mr. HAY. How often did she come through that ward?

Miss OMAHUNDRA. I have seen her once on my ward in the last year.

Mr. HAY. Once in the last year?

Miss OMAHUNDRA. Yes.

Mr. HAY. Who had charge of the female part of the wards before the person who has charge of it now? What did you say her name was? Doctor O'Malley?

Miss OMAHUNDRA. Yes.

Mr. HAY. Who had charge before she did?

Miss OMAHUNDRA. Doctor Clark.

Mr. HAY. How long has it been since she was put in charge?

Miss OMAHUNDRA. I don't know just how long. She has been there since last summer, but she was not in charge, I don't believe, until about a month or six weeks ago, I think.

Mr. HAY. She has only been in charge of all the wards for about six weeks.

Miss OMAHUNDRA. Yes; I don't know that that is exact, but it has been about that time.

Mr. HAY. Do you see any improvement over the way Doctor Clark carried it on?

MISS OMAHUNDRA. No; I don't.

MR. HAY. You do not see any improvement?

MISS OMAHUNDRA. No; it is about the same, I think.

MR. HAY. Have you anything to say with regard to it?

MISS OMAHUNDRA. No; I have nothing to say.

MR. HAY. You have to attend to your own room, too, I suppose.

MISS OMAHUNDRA. Yes; we all do.

MR. SMYSER. How frequently does Doctor O'Malley come through the ward?

MISS OMAHUNDRA. Every day, and sometimes twice a day. I have known her to come three times a day.

THE CHAIRMAN. If you needed her at any time, I suppose you could have gotten her by telephone, could you not?

MISS OMAHUNDRA. Oh, yes; we have a 'phone in the building.

MR. HAY. How many wards has she charge of?

MISS OMAHUNDRA. I really do not know. I have not counted them.

MR. HAY. Do you not know how many there are there?

MISS OMAHUNDRA. No, sir; I never counted them.

THE CHAIRMAN. Do you think, Miss Omahundra, that you have a sufficient amount of help there in your ward?

MISS OMAHUNDRA. Well, no. I think it would be better to have more help.

THE CHAIRMAN. You mean you think it would be better if you had an additional nurse?

MISS OMAHUNDRA. I do.

MR. SMYSER. That is, better for the patients or for the attendants?

MISS OMAHUNDRA. Oh, for the patients and for the attendants as well.

MR. SMYSER. Both?

MISS OMAHUNDRA. Yes.

THE CHAIRMAN. How many hours a day are you on duty?

MISS OMAHUNDRA. One day I am on duty from 6 a. m. until 8 p. m. The next day from 6 p. m. until about 5 or 5.30—between 5 and 5.30 p. m.

THE CHAIRMAN. How often do you get a day off, or half a day off?

MISS OMAHUNDRA. We have half a day each week, and we have every third Sunday off duty.

THE CHAIRMAN. In addition to the half day each week?

MISS OMAHUNDRA. Yes.

THE CHAIRMAN. You have a half day each week and every third Sunday?

MISS OMAHUNDRA. Yes.

THE CHAIRMAN. You live in the institution, do you not? You sleep there?

MISS OMAHUNDRA. Yes.

THE CHAIRMAN. How many are there in your dormitory?

MISS OMAHUNDRA. Why, I have a room to myself.

THE CHAIRMAN. You have a room to yourself?

MISS OMAHUNDRA. Yes; but in the nurses' home usually most of the rooms have two nurses in a room.

THE CHAIRMAN. Two nurses in each room?

MISS OMAHUNDRA. Yes.

The CHAIRMAN. Is there, in this nurses' home where you sleep, a sitting room also for the nurses?

Miss OMAHUNDRA. Yes, sir.

The CHAIRMAN. Where do you take your meals—in that home or in the hospital?

Miss OMAHUNDRA. No; in the building where I work.

Mr. SMYSER. Can you go away in the evening and go to the theater?

Miss OMAHUNDRA. We have permission to be absent until 12 o'clock once a week—one evening off a week.

Mr. SMYSER. What have you by way of diversion over there? Can you meet and have little social gatherings, and play "five hundred," or something like that, if you want to?

Miss OMAHUNDRA. I suppose they could; yes.

Mr. SMYSER. Have you any sort of a library over there?

Miss OMAHUNDRA. Yes; they have a library.

Mr. SMYSER. And a piano?

Miss OMAHUNDRA. Yes.

Mr. SMYSER. Are you permitted to warble a little?

Miss OMAHUNDRA. Yes; I think so.

Mr. SMYSER. And dance a little? I mean by way of diversion, for the health. You understand what I mean, I take it.

The CHAIRMAN. Is the nurses' home a separate building?

Miss OMAHUNDRA. Yes.

The CHAIRMAN. Do you know how many nurses there are there?

Miss OMAHUNDRA. No; I don't know how many there are.

Mr. HAY. It has been testified by some one—Mr. Hayden, I think—that in this home there was some restraint. Is there any?

Miss OMAHUNDRA. I do not know what he said, of course.

Mr. HAY. He said that when you would go to the home you were still under restraint. Was not that what he said?

The CHAIRMAN. He did not use the word "restraint."

Mr. HAY. He said "restraint," or "influence," or something like that.

Miss OMAHUNDRA. I never feel any myself. When I am off duty I am very comfortable in my room, where I stay there.

The CHAIRMAN. Is there any regulation of the hospital as to when the nurses must go to bed?

Miss OMAHUNDRA. Oh, yes; they are supposed to be in their rooms at 10 o'clock p. m.

The CHAIRMAN. At 10 o'clock?

Miss OMAHUNDRA. Yes.

The CHAIRMAN. But once a week they can go out?

Miss OMAHUNDRA. Yes; until 12 o'clock. You can go out each evening that you are off until 10, but you are supposed to be in your room at 10.

The CHAIRMAN. That is what I wanted to know. So that any evening after you are through with your duty you can go off, as long as you are back again in your room at 10 o'clock, and there is no infraction of the law?

Miss OMAHUNDRA. That is right.

Mr. HAY. You can leave the grounds if you want to?

Miss OMAHUNDRA. Oh, yes.

TESTIMONY OF MISS JESSIE FERRALL.

Miss JESSIE FERRALL, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. Miss Ferrall, you are a nurse at St. Elizabeth's?

Miss FERRALL. I am.

The CHAIRMAN. How long have you been there?

Miss FERRALL. I have been there four years and eight months.

The CHAIRMAN. What are your present wages?

Miss FERRALL. Thirty-five dollars a month.

The CHAIRMAN. Thirty-five dollars?

Miss FERRALL. Yes, sir.

The CHAIRMAN. What were they when you first went there?

Miss FERRALL. Fourteen dollars.

The CHAIRMAN. Were they raised gradually?

Miss FERRALL. I was raised every six months.

The CHAIRMAN. When were your wages made thirty-five dollars?

Miss FERRALL. I think it was in September.

The CHAIRMAN. Are you in charge of one of the wards?

Miss FERRALL. I am.

The CHAIRMAN. Which one?

Miss FERRALL. L.

The CHAIRMAN. What is the character of the patients that are there?

Miss FERRALL. They are convalescing patients.

The CHAIRMAN. Do you mean by that, convalescing after having been in the hospital, or patients who are gradually getting cured of their mental disturbances?

Miss FERRALL. They are patients that are gradually being cured.

The CHAIRMAN. Are they generally mild-mannered and quiet?

Miss FERRALL. Yes; most of them are. Sometimes they are a little disturbed.

The CHAIRMAN. What do you mean by "a little disturbed?"

Miss FERRALL. Why, a little noisy and excited, and talking a good bit at times.

The CHAIRMAN. Do they ever offer violence to themselves or to the other patients, or to you?

Miss FERRALL. No.

The CHAIRMAN. You have never seen anything of that kind in your ward?

Miss FERRALL. I have one that is violent sometimes, but it rarely ever happens during the day. It is usually at night that she is disturbed.

The CHAIRMAN. How is she violent; what does she do?

Miss FERRALL. She is very noisy; yelling and banging on the doors.

The CHAIRMAN. Will she get up out of bed?

Miss FERRALL. Yes, she will get up out of bed and bang the furniture around, and bang on the doors. Usually she makes a good bit of noise.

The CHAIRMAN. What do you do in the way of treatment of her? By the way, are you on duty during the night, or in the day?

Miss FERRALL. No; I am on day duty.

The CHAIRMAN. Have you ever seen this particular patient when she was noisy, beating on the door, and doing things of that kind?

MISS FERRALL. No, I never saw it myself; I only heard it.

THE CHAIRMAN. You only heard it?

MISS FERRALL. I heard it from the night nurse.

THE CHAIRMAN. But you know what is done. When she gets in this condition is she restrained in any way?

MISS FERRALL. No, she is not restrained.

THE CHAIRMAN. How do they quiet her?

MISS FERRALL. The night nurse usually comes in and talks to her and tries to quiet her in the best way she can. I never heard of any restraint.

THE CHAIRMAN. Is she usually able to quiet her?

MISS FERRALL. She usually quiets down after a little while.

THE CHAIRMAN. Is she sensible enough to ever say why she has been noisy?

MISS FERRALL. No; she has never told me. She talks very little to me.

THE CHAIRMAN. But during the day you say this particular woman is quiet?

MISS FERRALL. Yes, she is usually quiet during the day.

THE CHAIRMAN. How many nurses are there in this ward of which you have charge?

MISS FERRALL. Two, only.

THE CHAIRMAN. That is, two during the daytime?

MISS FERRALL. Two during the day, and one at night.

THE CHAIRMAN. How many patients are there?

MISS FERRALL. Thirty-five.

THE CHAIRMAN. You sleep in the institution, do you not?

MISS FERRALL. No; I sleep at the nurses' home.

THE CHAIRMAN. At the nurses' home. I mean you sleep in the hospital grounds?

MISS FERRALL. Oh, yes; yes.

THE CHAIRMAN. Have you a separate room there by yourself—a separate bedroom?

MISS FERRALL. No. I am sleeping alone at present, but I did have a roommate until she left the hospital.

THE CHAIRMAN. Do you know how many people there are in that nurses' home—how many nurses live there?

MISS FERRALL. I could not tell you the exact number.

THE CHAIRMAN. About how many; fifty, sixty, or seventy?

MISS FERRALL. I expect there is every bit of seventy, perhaps more.

THE CHAIRMAN. How often does Doctor O'Malley come through that ward?

MISS FERRALL. She comes through every morning, usually about 10 o'clock.

THE CHAIRMAN. Does she come again, at all, in the afternoon?

MISS FERRALL. She does sometimes; but she usually makes one daily round always.

THE CHAIRMAN. Does she talk to the patients when she comes in there?

MISS FERRALL. Yes; she goes around and talks to everyone; and if there is any in bed she usually goes up to see them.

MR. HAY. How many wards has she control of, under her charge?

MISS FERRALL. She has charge of the whole East Side—the female side.

The CHAIRMAN. Did you ever know Mrs. Lochte there?

Miss FERRALL. No, I never knew her, but I have seen her.

The CHAIRMAN. Was she in your ward?

Miss FERRALL. No.

The CHAIRMAN. Where have you seen her?

Miss FERRALL. I saw her on C-first.

The CHAIRMAN. Was she pointed out to you particularly? Was there anything remarkable about her that caused you to know particularly who she was?

Miss FERRALL. I helped to put her in a pack one day.

The CHAIRMAN. Was Miss Carrie Hill your assistant at that time in putting her in the pack?

Miss FERRALL. Miss Hill, Miss Edwards, Miss Omahundra, and myself.

The CHAIRMAN. It took four of you to do that?

Miss FERRALL. Yes.

The CHAIRMAN. Was that usual or unusual?

Miss FERRALL. No, it was nothing unusual in her case, as she was a disturbed patient.

The CHAIRMAN. Did she object to being put in the pack, particularly?

Miss FERRALL. No, we didn't have any trouble with her. We just undressed her and put her in the pack. She didn't offer any trouble.

The CHAIRMAN. She made no resistance while this was being done?

Miss FERRALL. No.

The CHAIRMAN. Did she seem to object to being in the pack after she got there?

Miss FERRALL. No, she didn't offer any objections at all.

Mr. HAY. Was that the only time she was put in the pack?

Miss FERRALL. I never saw her in the pack but that one time. In fact I never saw her before, and I have never seen her since, and I wouldn't know her if I was to see her.

The CHAIRMAN. Was it a part of your duties to put patients in packs in this way?

Miss FERRALL. Well, when it was necessary.

The CHAIRMAN. This was done upon a physician's order?

Miss FERRALL. Yes.

The CHAIRMAN. It was done immediately after they were bathed, was it not, usually; or was it not, usually?

Miss FERRALL. No, this was given to quiet her. She had been very much disturbed.

The CHAIRMAN. Was it part of her treatment ordered by the physician?

Miss FERRALL. Yes.

The CHAIRMAN. Do you have to bathe patients frequently—attend to their bathing?

Miss FERRALL. Bathe them?

The CHAIRMAN. Yes.

Miss FERRALL. Yes.

The CHAIRMAN. How often are the patients bathed?

Miss FERRALL. Once a week, and sometimes oftener if necessary.

The CHAIRMAN. Is that done with the shower, or in the bath tub?

Miss FERRALL. It is done with the shower.

The CHAIRMAN. You have not any tubs in that ward?

Miss FERRALL. No; I haven't a tub in my ward.

The CHAIRMAN. Do the patients seem to like the shower bath?

Miss FERRALL. Some of them object, but I think most of them like it.

The CHAIRMAN. What do you do to the ones that object?

Miss FERRALL. Well, I just have to coax them and get them in there the best way I possibly can.

The CHAIRMAN. What do you know about the food in the hospital?

Miss FERRALL. Well, the food sometimes is very good, and very often I think it can be improved on.

The CHAIRMAN. You mean in regard to the quality of the food, or the way it is cooked?

Miss FERRALL. Well, I mean both—both quality and cooking.

The CHAIRMAN. Is this so in regard to the meat and vegetables both?

Miss FERRALL. Yes.

The CHAIRMAN. Have you ever made any complaint about it? Have you ever talked about this to anybody? Did you ever talk to Doctor O'Malley about it, for instance?

Miss FERRALL. No; I never have.

The CHAIRMAN. Did you ever talk with the supervisor? Is there a supervisor over you?

Miss FERRALL. Yes. I have never spoken to her about it at all.

The CHAIRMAN. Why not?

Miss FERRALL. Because there has been a good many complaints, and I thought it was useless for me to complain.

The CHAIRMAN. How is the butter?

Miss FERRALL. We don't have butter.

The CHAIRMAN. Well, how is the oleomargarine?

Miss FERRALL. It is not very good.

The CHAIRMAN. Is the food that the patients get as good as the food that the nurses get?

Miss FERRALL. Well, in my ward it is very much better.

The CHAIRMAN. Are the things not cooked properly? Are they not cooked enough? Are not the potatoes cooked, for instance?

Miss FERRALL. Sometimes they are not cooked done. Sometimes they are not cooked enough.

The CHAIRMAN. Are they usually served with the skins on or off?

Miss FERRALL. They have their skins off.

The CHAIRMAN. They are peeled?

Miss FERRALL. Yes.

The CHAIRMAN. Does Doctor White often come to your ward?

Miss FERRALL. He has been there quite frequently with company.

The CHAIRMAN. Do any of the male doctors come there regularly?

Miss FERRALL. Doctor Clark comes through occasionally, but Doctor O'Malley makes the regular rounds.

The CHAIRMAN. She is the doctor in charge of the female patients generally, I suppose?

Miss FERRALL. Yes.

Mr. HAY. How often does the Board of Visitors come through your ward?

Miss FERRALL. I have never seen the full Board of Visitors. I have seen some members of the board. Mrs. Gangewer comes in

quite often. She has a daughter that is an inmate of the hospital, and is on my ward.

Mr. HAY. She has a daughter on your ward?

Miss FERRALL. Yes.

Mr. HAY. Who had charge of this part of the hospital before it was taken charge of by the person who has charge of it now?

Miss FERRALL. I don't understand you.

Mr. HAY. Did Doctor Clark have charge of it before?

Miss FERRALL. Before Doctor O'Malley?

Mr. HAY. Yes.

Miss FERRALL. Yes, sir.

Mr. HAY. How long has it been since he had charge of it?

Miss FERRALL. I think it has been about three months. I don't think it has been any longer.

Mr. HAY. Has there been any improvement in it since he gave it up?

Miss FERRALL. Why, no; I couldn't say there is any decided improvement.

The CHAIRMAN. Miss Ferrall, there is one question I did not ask and which I meant to ask you. Do you ever have to tie patients in bed?

Miss FERRALL. Oh, no; it is not necessary.

The CHAIRMAN. You have never done it at all?

Miss FERRALL. I have done it when I was on the hospital wards to keep them in bed, and from falling out when they were disturbed.

The CHAIRMAN. You mean when they were delirious; you mean disturbed in that sense?

Miss FERRALL. Yes.

The CHAIRMAN. But in your ward now you do not ever have to tie them in bed?

Miss FERRALL. Oh, no, sir.

The CHAIRMAN. Did you ever put these camisoles on them?

Miss FERRALL. No.

The CHAIRMAN. You have not had occasion to do that at all?

Miss FERRALL. No, sir.

Mr. HAY. The patients in your ward are, you say, convalescing?

Miss FERRALL. Convalescing; yes, sir.

Mr. SMYSER. What is the manner of conducting that institution now as compared with its management and conduct during the time you first went there?

Miss FERRALL. I don't understand you.

Mr. SMYSER. What is the manner of conducting the institution now—the treatment of patients, resorting to the camisole, and so on, as a means of restraint, and kindness toward patients under Doctor White as compared with the management when you first went there?

Miss FERRALL. Well, they are not used as much, and there is not anything like as much restraint as there was before, when I first went there.

Mr. SMYSER. Do you know why?

Miss FERRALL. Do I know why? No.

Mr. SMYSER. But you know the fact?

Miss FERRALL. I know that there is not as much restraint as there was when I first went there.

Mr. SMYSER. From your observation out there generally, what is the treatment of the patients by the nurses and attendants?

Miss FERRALL. Why, it has been good, all that came under my notice.

Mr. SMYSER. Do you know of any instance of cruelty?

Miss FERRALL. I do not.

Mr. SMYSER. Did you ever see anything of the kind?

Miss FERRALL. No, sir.

Mr. SMYSER. Were you ever guilty of anything of that kind yourself?

Miss FERRALL. No, sir.

Mr. SMYSER. Have you ever been struck by a patient?

Miss FERRALL. Have I? Yes; I have.

Mr. SMYSER. And of course you realized their condition and got along as best you could. Is that it?

Miss FERRALL. That is what I did.

Mr. SMYSER. And you have tried to do that in all cases?

Miss FERRALL. I have tried to do that in all cases.

Mr. SMYSER. So far as you know, is that generally done by the nurses and attendants?

Miss FERRALL. Yes; as far as I know, it is.

Mr. SMYSER. That is what I mean, as far as you know. Is there any disposition out there on the part of the attendants to be cruel toward these poor people?

Miss FERRALL. No; I don't think there is anyone that has any desire to be cruel or to maltreat patients, to my knowledge.

TESTIMONY OF MISS MARY EDWARDS.

MISS MARY EDWARDS, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. What is your name, please?

MISS EDWARDS. Miss Mary Edwards.

The CHAIRMAN. Are you a nurse at St. Elizabeth's?

MISS EDWARDS. I am.

The CHAIRMAN. How long have you been there?

MISS EDWARDS. I have been there four years.

The CHAIRMAN. You were appointed by Doctor Richardson?

MISS EDWARDS. I was.

The CHAIRMAN. Where did you reside prior to coming here?

MISS EDWARDS. In St. Mary County, Maryland.

The CHAIRMAN. Had you ever had any experience as a nurse before that?

MISS EDWARDS. I had not.

The CHAIRMAN. What were your wages when you first went there?

MISS EDWARDS. I first went there in the kitchen. I began in the kitchen at \$10 a month. I worked there nine months, and from there I was transferred to the wards. My wages there were \$14 a month the first six months, the next six months \$16, if I remember correctly, and I entered the training at that time.

The CHAIRMAN. You entered the training school?

MISS EDWARDS. I did.

The CHAIRMAN. How much do you get now?

Miss EDWARDS. I get \$35 now.

The CHAIRMAN. Are you in charge of one of the wards?

Miss EDWARDS. I am.

The CHAIRMAN. Which one?

Miss EDWARDS. I am in charge of the receiving ward.

The CHAIRMAN. What is the character of the patients there?

Miss EDWARDS. At present I have a disturbed class of patients. I also have some patients in bed, and suicide patients.

The CHAIRMAN. Suicide patients?

Miss EDWARDS. Suicide patients.

The CHAIRMAN. Have you more than one suicide patient?

Miss EDWARDS. Yes; there is more than one suicide patient there.

The CHAIRMAN. Do you mean that their great desire is to kill themselves?

Miss EDWARDS. No; they are not desperate suicides.

The CHAIRMAN. How do they show that they are suicide patients?

Miss EDWARDS. I have not any on my ward now that have ever made an attempt to commit suicide since I have had them.

Mr. SMYSER. You get that from the history that comes to you; is that it?

Miss EDWARDS. That is it. They are admitted——

Mr. SMYSER. They are admitted for that reason?

Miss EDWARDS. Admitted for that reason; yes, sir.

The CHAIRMAN. Do you ever have to restrain any of the patients by any jackets, or by tying them in bed, or anything of that kind?

Miss EDWARDS. I have had to restrain them by tying them in bed.

The CHAIRMAN. How?

Miss EDWARDS. I have had to tie them in bed.

The CHAIRMAN. How do you do that?

Miss EDWARDS. I tie the sheet to one side of the bed and bring it across the patient's body and tie it on the other side.

The CHAIRMAN. The patient is properly clad in night clothes?

Miss EDWARDS. Always.

The CHAIRMAN. Does that hurt the patient?

Miss EDWARDS. No; it is not tied tight enough to hurt the patient.

The CHAIRMAN. The patient can move underneath it?

Miss EDWARDS. They can move underneath it.

The CHAIRMAN. Do you do that at night when they go to bed?

Miss EDWARDS. No; I have none that I have to restrain at night. I have bed patients that have to be restrained to prevent them from falling from bed, but not for violence.

The CHAIRMAN. Is this because they are delirious, on account of illness, or on account of the nature of their mental trouble?

Miss EDWARDS. I suppose it is on account of their mental trouble. I don't know that.

The CHAIRMAN. Do you have to take the temperature of the patients?

Miss EDWARDS. I do.

The CHAIRMAN. Is that done regularly with all the patients who are in bed? Do you do that daily?

Miss EDWARDS. With all bed patients?

The CHAIRMAN. Yes.

Miss EDWARDS. There are some I don't take the temperature. Some

of them are simply confined to bed from feebleness, and others are sick.

The CHAIRMAN. Do you make any regular report of the examinations you make for temperature?

Miss EDWARDS. I do.

The CHAIRMAN. That is handed to whom?

Miss EDWARDS. To the doctor in charge.

The CHAIRMAN. That is Doctor O'Malley?

Miss EDWARDS. That is Doctor O'Malley at present.

The CHAIRMAN. How often does Doctor O'Malley come to the ward?

Miss EDWARDS. Doctor O'Malley comes around twice a day every day, and sometimes oftener.

The CHAIRMAN. How many patients are there in that ward?

Miss EDWARDS. At present there are 25 patients there.

The CHAIRMAN. How many attendants are there?

Miss EDWARDS. Three.

The CHAIRMAN. One at night and two during the day?

Miss EDWARDS. Three during the day and two at night.

The CHAIRMAN. Five altogether?

Miss EDWARDS. Five altogether.

The CHAIRMAN. Is that sufficient to take care of all the patients?

Miss EDWARDS. I do not consider it sufficient in the daytime, because there is a good deal of other work there to do.

The CHAIRMAN. What other work do you have to do?

Miss EDWARDS. We have to take care of the ward and keep our rooms clean. Then we have the douche room, and the nurse has to go down to the douche room every morning, and sometimes it needs the assistance of another nurse to take a patient down.

The CHAIRMAN. You mean the people who work in the douche room?

Miss EDWARDS. No; they have a treatment that they call the douche treatment. They go down for treatment.

The CHAIRMAN. That is the system of shower baths and needle baths?

Miss EDWARDS. Yes.

The CHAIRMAN. Do the patients like that treatment generally?

Miss EDWARDS. They do. They seem to like it.

The CHAIRMAN. Do you assist in putting patients in packs?

Miss EDWARDS. No, sir; I do not. That is not done on the wards.

The CHAIRMAN. That is not done at all in your ward?

Miss EDWARDS. It is not done on the ward.

The CHAIRMAN. You say you were in the kitchen for a considerable length of time—nine months, you say?

Miss EDWARDS. Nine months; yes.

The CHAIRMAN. That was before Doctor White was there?

Miss EDWARDS. That was before Doctor White's time. I went on the ward before he came to the hospital at all.

The CHAIRMAN. How was the food when you were in the kitchen; good or bad?

Miss EDWARDS. The food was fair.

The CHAIRMAN. Has it improved, or otherwise, since? Is it better now, or worse, than it was?

Miss EDWARDS. I do not see very much change in it at all.

The CHAIRMAN. You think generally the food is good there?

Miss EDWARDS. I do.

The CHAIRMAN. Have you ever had any cause to complain in regard to the food particularly?

Miss EDWARDS. No; I can not say that I have. At times we have not had sufficient in quantity.

The CHAIRMAN. Do you have any difficulty in getting sufficient quantity if you send after it?

Miss EDWARDS. Sometimes we have had difficulty; but most times we get sufficient quantity when we send after it.

The CHAIRMAN. Does that often happen?

Miss EDWARDS. I don't know a great deal about that, because I don't go to the dining room. I stay on the ward.

The CHAIRMAN. As far as you know, is the food the patients get as good as the food the nurses get?

Miss EDWARDS. Sometimes the food is better that the patients get, and sometimes it is better for the nurses.

The CHAIRMAN. How is the butter?

Miss EDWARDS. I don't consider that butter at all.

Mr. SMYSER. You do not what?

Miss EDWARDS. I don't consider it butter at all.

Mr. SMYSER. What is it?

Miss EDWARDS. I don't know. They say it is oleomargarine. I can't tell.

Mr. SMYSER. Were you raised in the country?

Miss EDWARDS. I was.

The CHAIRMAN. Did you ever see any cruelty to any patient there on the part of any nurse?

Miss EDWARDS. I never did.

The CHAIRMAN. Did you ever see any disturbance between the patients themselves?

Miss EDWARDS. Yes; I have seen patients have disturbances between themselves.

The CHAIRMAN. What do you do when that happens; separate them?

Miss EDWARDS. Yes, sir.

The CHAIRMAN. Did any patient ever strike you?

Miss EDWARDS. Yes, sir. I have been struck and bitten, too, by patients.

The CHAIRMAN. What do you say?

Miss EDWARDS. I have been struck and bitten, both, by patients.

The CHAIRMAN. What do you do in such an occurrence; call assistance?

Miss EDWARDS. I do.

The CHAIRMAN. You call one of the other nurses?

Miss EDWARDS. Call one of the other nurses; yes, sir.

The CHAIRMAN. When Doctor O'Malley comes through the ward does she talk to most of the patients, or speak with them?

Miss EDWARDS. Yes, sir; she does.

The CHAIRMAN. How long does it take her to go through your ward, for instance, where there are 25 or 26 people?

Miss EDWARDS. I don't know. I never timed her. I don't know how long it took.

The CHAIRMAN. Half an hour or so?

Miss EDWARDS. I guess more than that.

The CHAIRMAN. Do you know how many wards she has to go through?

Miss EDWARDS. No, sir.

The CHAIRMAN. Do you know how many patients are under Doctor O'Malley's control?

Miss EDWARDS. I do not.

The CHAIRMAN. One of the other witnesses testified that on the ward of which she had charge there were something over 30 patients, and there were only 3 nurses—2 day nurses and 1 night nurse. Do you know why it is there are more in your ward than in the other? Is the character of your patients different?

Miss EDWARDS. Well, I suppose having the suicide patients it requires more help there and more careful watching.

The CHAIRMAN. How many suicide patients are there now under your control?

Miss EDWARDS. I do not exactly recall the number.

The CHAIRMAN. Are there three or four?

Miss EDWARDS. Yes; there are three or four.

Mr. HAY. How often does Doctor White go through the ward?

Miss EDWARDS. Doctor White made a visit through my ward every Sunday.

Mr. HAY. Have you ever seen any of the Board of Visitors in your ward?

Miss EDWARDS. I have seen some of the members.

Mr. HAY. How often?

Miss EDWARDS. I couldn't tell you that; I don't know.

Mr. HAY. Can you not give us some idea; is it every six months?

Miss EDWARDS. Well, I don't know whether they come every six months or not.

Mr. HAY. You do not?

Miss EDWARDS. I don't know.

The CHAIRMAN. Do you know Mrs. Lochte?

Miss EDWARDS. I do.

The CHAIRMAN. Was she in your ward?

Miss EDWARDS. Yes, sir; I received her.

The CHAIRMAN. What sort of a patient was she?

Miss EDWARDS. She was a very obstinate and disturbed patient. She resisted almost everything that we wanted her to do. In bathing her, she never wanted to take a bath. She always resisted bathing.

The CHAIRMAN. Did she give any reason for not wanting to take baths?

Miss EDWARDS. No; she gave no reason for not wanting to. She simply said she did not want to take it.

The CHAIRMAN. Did you ever have any serious trouble with her?

Miss EDWARDS. The day after she was admitted she attacked me on the ward, at dinner time. She didn't go to the dining room to dinner, and I was on the ward alone. She attacked me that day, and simply held me in a position that I could do nothing until I got help. After I got help she was put in her room.

The CHAIRMAN. Did you ever know of her being choked with a towel?

Miss EDWARDS. I did not.

The CHAIRMAN. Did you ever know of any patient being choked with a towel?

Miss EDWARDS. No, sir; I never saw it.

The CHAIRMAN. Or being choked in any other way?

Miss EDWARDS. No, sir.

The CHAIRMAN. Or being treated with unnecessary harshness?

Miss EDWARDS. No, sir; I don't know anything about it, and never saw it done.

Mr. SMYSER. Do you know whether Mrs. Lochte was fed with a tube?

Miss EDWARDS. I don't remember anything about her being fed with a tube.

Mr. SMYSER. Have you ever fed patients in that way?

Miss EDWARDS. I have assisted when the doctor fed them. I never fed them.

Mr. SMYSER. What kind of an arrangement is this tube that they use for feeding?

Miss EDWARDS. It is a soft rubber tube, having a funnel at one end through which the nourishment is poured.

Mr. SMYSER. How long is it?

Miss EDWARDS. I should judge about 30 inches long. I don't know; but all of that does not——

Mr. SMYSER. Did you ever see any glass tube used for that purpose?

Miss EDWARDS. No, sir.

Mr. SMYSER. Or a metal tube?

Miss EDWARDS. No, sir.

Mr. SMYSER. Could glass or metal be used for that purpose?

Miss EDWARDS. I don't see how they could.

Mr. SMYSER. Did you ever see Mrs. Lochte tied down there, or know of her being fed with a tube?

Miss EDWARDS. No, sir.

Mr. SMYSER. What do you know about when she was sitting in the reception room, and four women came and took her bodily, and took a towel, put it over her face, and wrung it underneath her neck as tight as it could be done, and she had to fight for her life?

Miss EDWARDS. I don't know anything about that. I never heard of it before.

Mr. SMYSER. Is this the first you ever heard of any such circumstance?

Miss EDWARDS. It is.

Mr. SMYSER. Did you yourself engage in any such transaction?

Miss EDWARDS. I certainly did not.

Mr. SMYSER. Did you ever hear tell of it before you heard it here?

Miss EDWARDS. No, sir; I never heard tell of it before I heard you speak of it.

The CHAIRMAN. How long was Mrs. Lochte there?

Miss EDWARDS. She was admitted on the 26th of June. I was on the ward from that time until about the 15th or 16th of August, I don't remember which. I left the ward then and she left while I was away. I did not go back until about the last of September or the 1st of October, and she went home while I was away.

Mr. HAY. Was she there all the time that she was in the hospital—in this same ward?

Miss EDWARDS. Yes, sir.

Mr. SMYSER. Do you know anything about a little short woman out there, during the time Mrs. Lochte was there, and about two nurses taking her by the hair—this little short woman—and dragging her and blacking her face and eyes?

Miss EDWARDS. No, sir.

Mr. SMYSER. Did you take part in any such transactions?

Miss EDWARDS. I certainly did not.

Mr. SMYSER. Did you ever hear of it before you heard of it here?

Miss EDWARDS. No, sir.

Mr. SMYSER. Do you think it ever occurred?

Miss EDWARDS. Not to my knowledge. If it ever occurred I knew nothing of it. I don't think it occurred.

Mr. SMYSER. Could such a thing occur, as I have called your attention to here, and you not have some knowledge of it?

Miss EDWARDS. No, sir; I don't think so.

Mr. SMYSER. And your associates in the ward—were they inclined to be cruel or otherwise?

Miss EDWARDS. They were inclined to be otherwise. I have never had anyone on the ward with me that was inclined to be cruel.

Mr. SMYSER. From your observation there, generally, are the nurses and attendants inclined to treat patients as considerably as possible?

Miss EDWARDS. Yes, sir; I think they are.

Mr. SMYSER. Did you ever see anything there that, being raised in the country, made you feel as though it was cruel?

Miss EDWARDS. No, sir; I have not.

Mr. SMYSER. Did you ever engage in anything of that kind yourself?

Miss EDWARDS. No, sir.

Mr. SMYSER. Now, coming to your ward, do you think it would be better for your ward, for instance, if you had an attendant there to do the menial work, such as cleaning up and so on, so that you and your associates could devote your attention entirely to the patients?

Miss EDWARDS. I do.

Mr. SMYSER. In other words, you, as a nurse, ought to be relieved of that part of the work?

Miss EDWARDS. Yes, sir.

Mr. SMYSER. You think that would be an improvement, not only for the patients, but would be beneficial to the attendants, as well?

Miss EDWARDS. Yes, sir; I do.

The CHAIRMAN. Do the patients ever help you in cleaning up or making beds?

Miss EDWARDS. Yes, sir.

The CHAIRMAN. Are they compelled to do that?

Miss EDWARDS. No, sir; they are not. They do it of their free will. If they don't want to do it they don't have to.

The CHAIRMAN. Four years you say you have been there?

Miss EDWARDS. Four years.

Mr. SMYSER. Before Doctor White came there you had been assigned to a ward?

Miss EDWARDS. No, I was not in charge of a ward; no.

Mr. SMYSER. But you were on one?

Miss EDWARDS. I was on a ward before that time; yes.

Mr. SMYSER. Now, Miss Edwards, what is the manner of the treatment of the patients there now, under Doctor White, as compared with the treatment of them before he took charge?

Miss EDWARDS. Why, I think the treatment is better now.

Mr. SMYSER. In what regard?

Miss EDWARDS. There is not as much restraint used now.

Mr. SMYSER. That is gradually disappearing?

Miss EDWARDS. Yes.

Mr. SMYSER. Do you know why that is?

Miss EDWARDS. I couldn't say that I do.

Mr. SMYSER. Do you know whether it has been the policy of Doctor White to eliminate as far as possible restraint of patients?

Miss EDWARDS. I think it is.

Mr. SMYSER. Now, have the patients and the nurses responded to that sentiment and feeling and disposition of Doctor White?

Miss EDWARDS. As far as I know, I think they have.

Mr. SMYSER. And do you feel that now the institution is being better managed than it was then, by reason of the elimination of these restraints and resorting to as mild treatment as possible?

Miss EDWARDS. Well——

Mr. SMYSER. You do not quite understand my question?

Miss EDWARDS. I don't quite understand your question.

Mr. SMYSER. You have described the gradual elimination, as far as possible, of means of restraint and the substitution of gentler means. Do you believe that has been an improvement in the institution?

Miss EDWARDS. I believe it is a benefit to the patients.

Mr. SMYSER. Did you have the douche rooms there before the advent of Doctor White?

Miss EDWARDS. Not for the female patients.

Mr. SMYSER. From your observation, was that an appropriate thing to do? Has it been beneficial to the patients?

Miss EDWARDS. I think it has.

The CHAIRMAN. Are most of the patients willing to take these douche baths?

Miss EDWARDS. They are.

The CHAIRMAN. And they enjoy them rather than otherwise?

Miss EDWARDS. Yes.

TESTIMONY OF PHILIP J. MARTIN.

PHILIP J. MARTIN, being duly sworn, was examined and testified as follows:

The CHAIRMAN. What is your name?

Mr. MARTIN. Philip J. Martin—M-a-r-t-i-n.

The CHAIRMAN. Are you an attendant at St. Elizabeth's?

Mr. MARTIN. Yes, sir.

The CHAIRMAN. How long have you been there?

Mr. MARTIN. I have been there since April 19, 1897.

Mr. SMYSER. 1897?

Mr. MARTIN. April 19, 1897.

The CHAIRMAN. How old are you?

Mr. MARTIN. Thirty-three.

The CHAIRMAN. Had you been employed anywhere before you went to the hospital?

Mr. MARTIN. No, sir.

The CHAIRMAN. You just came from school?

Mr. MARTIN. No, sir; I stopped school when I was about 12 years old.

The CHAIRMAN. What did you do between that time and 1897?

Mr. MARTIN. Trucking on a truck farm.

The CHAIRMAN. Where did you live?

Mr. MARTIN. I lived here in the District, on Wheeler road.

The CHAIRMAN. What ward are you in at the hospital?

Mr. MARTIN. B building 1, the receiving ward.

The CHAIRMAN. What class of patients have you there?

Mr. MARTIN. We have suicides there, and homicides, and a few sick in bed—a noisy and disturbed class.

The CHAIRMAN. Are all of them pretty noisy and disturbed?

Mr. MARTIN. Not all of them.

The CHAIRMAN. Do the patients remain a considerable length of time in the receiving ward or are they transferred from the receiving ward to one of the other wards?

Mr. MARTIN. As soon as the doctor sees fit to transfer them, they are transferred to another ward.

The CHAIRMAN. The receiving ward is not considered one of the most improved wards—

Mr. MARTIN. It is one of the new wards, but they are transferred to a more quiet ward from the receiving ward.

The CHAIRMAN. The people there are there temporarily?

Mr. MARTIN. Temporarily, under observation; yes.

The CHAIRMAN. Did you know a man there by the name of Shuster?

Mr. MARTIN. Yes, sir.

The CHAIRMAN. What sort of a patient was he? In what condition was he?

Mr. MARTIN. When he first was received there he was intoxicated. He stayed in bed about a week or two—until that all wore out of him. After he got up he was still dopey yet.

Mr. SMYSER. He was what?

Mr. MARTIN. Dopey like.

The CHAIRMAN. Did you ever have any trouble with him?

Mr. MARTIN. No, sir; I never had any trouble with him.

The CHAIRMAN. Did you ever have anything to do with bathing him?

Mr. MARTIN. Bathing Shuster?

The CHAIRMAN. Yes. Did you ever attend him when he was bathing?

Mr. MARTIN. Yes, sir.

The CHAIRMAN. Did he ever object to being bathed by you, or being attended by you?

Mr. MARTIN. No, sir.

The CHAIRMAN. When you bathed the patients over there, did you ever bathe a patient in water that was not clean?

Mr. MARTIN. I never did.

The CHAIRMAN. Did you ever know of it being done?

Mr. MARTIN. No, sir; I did not.

The CHAIRMAN. How often did you bathe patients?

Mr. MARTIN. Those that are up and around we bathe once a week, and their clothes are changed once a week. Those that needed it got bathed oftener during the week—that is, untidy patients, patients that soil their beds, and so forth.

The CHAIRMAN. How many patients did you bathe in the morning?

Mr. MARTIN. About 25.

The CHAIRMAN. How long would it take you?

Mr. MARTIN. It would take us from half-past 7 until 11 o'clock.

The CHAIRMAN. Did you bathe them in tubs?

Mr. MARTIN. Yes, sir; we only had one tub on the ward at that time.

The CHAIRMAN. You say you changed the water for every bath, did you?

Mr. MARTIN. Every time, sir; and sometimes I would have to disinfect the tub, because on the ward I was on prior to going to the B building there were cases there, cancer cases, and some had carbuncles, and syphilitic diseases, which my own conscience would demand of me not to bathe another man in the tub without disinfecting it.

The CHAIRMAN. Your duties were in cases of that kind to disinfect the tub after the patient had bathed?

Mr. MARTIN. No, sir; that was my own idea, on account of ideas of my own.

The CHAIRMAN. How did you disinfect it, with carbolic acid?

Mr. MARTIN. With carbolic acid and I scrubbed it out.

The CHAIRMAN. Was the tub always scrubbed out after one patient bathed before another was put in?

Mr. MARTIN. It was while I was there, sir.

Mr. HAY. Were you in charge of the ward?

Mr. MARTIN. I am at the present time, sir.

The CHAIRMAN. Mr. Shuster testified about your having taken a collar button and knife of his.

Mr. MARTIN. I had nothing to do with that. That comes under the head of supervisor.

The CHAIRMAN. You never did anything of the kind?

Mr. MARTIN. No, sir.

The CHAIRMAN. Do you know anything about it?

Mr. MARTIN. No, sir; the supervisor takes charge of all that, and makes an inventory of the same.

The CHAIRMAN. At any rate, you never took anything from Mr. Shuster?

Mr. MARTIN. No, sir.

(At this point Mr. Olcott temporarily withdrew, and Mr. Smyser took the chair as acting chairman.)

The ACTING CHAIRMAN. You say you had nothing to do with the knife and collar-button business?

Mr. MARTIN. No, sir.

The ACTING CHAIRMAN. What do you know about the cruel treatment of patients out there?

Mr. MARTIN. I don't know anything about it, sir. I have never seen any done. Nearly all my time in the hospital—the nine years I have been there—I have been on what they term as the infirm ward, where the old class of men are.

The ACTING CHAIRMAN. Did you ever mistreat them yourself?

Mr. MARTIN. No, sir; I never have, to my knowledge.

The ACTING CHAIRMAN. Or see others do it?

Mr. MARTIN. I never have, sir. If I had, I think I would have taken action in the matter myself.

The ACTING CHAIRMAN. Would you have reported it?

Mr. MARTIN. I would have done so, sir.

The ACTING CHAIRMAN. How is the institution conducted now, as compared to its management under Doctor Richardson, say?

Mr. MARTIN. As far as I can see, I think it is just about the same.

The ACTING CHAIRMAN. And the attendants and nurses, to your knowledge, how are they generally? Are they humane or cruel and brutal in their treatment of patients?

Mr. MARTIN. To my knowledge I think they are humane.

The ACTING CHAIRMAN. Did you ever have a patient strike you?

Mr. MARTIN. Yes, sir; I had one strike me—right in the neck, too. [Laughter.]

The ACTING CHAIRMAN. He gave it to you in the neck?

Mr. MARTIN. That is what he did.

The ACTING CHAIRMAN. Did you give it back to him?

Mr. MARTIN. No, sir.

The ACTING CHAIRMAN. What did you do?

Mr. MARTIN. I caught him by his arm and set him down in a chair, and I didn't set him down roughly either.

The ACTING CHAIRMAN. Did you ever strait-jacket anybody?

Mr. MARTIN. I have, sir.

The ACTING CHAIRMAN. What did you do that for?

Mr. MARTIN. I had orders to.

The ACTING CHAIRMAN. Did it hurt the patient?

Mr. MARTIN. No, sir; I don't think it hurt the patient in any way, sir. It was for his own good and for the good of others.

The ACTING CHAIRMAN. Do you know of an instance out there where the strait-jacket has been put on for the purpose of annoying or worrying a patient?

Mr. MARTIN. I do not, sir.

The ACTING CHAIRMAN. Would you tell us if you did?

Mr. MARTIN. I would, sir.

The ACTING CHAIRMAN. You are not afraid of losing your job out there, are you?

Mr. MARTIN. No, sir; not a bit of it.

The ACTING CHAIRMAN. Well, I just wanted to find out. You are willing to tell us what you know?

Mr. MARTIN. That is what I am here for. Anything you want to know, and I know anything about it, just go ahead.

The ACTING CHAIRMAN. That is what we are after. Have you got enough attendants out there?

Mr. MARTIN. I think not, sir.

The ACTING CHAIRMAN. You do not think that just because you want to lighten the work a little yourself, do you?

Mr. MARTIN. No, sir.

The ACTING CHAIRMAN. Give us, in a few words, your own ideas on that. You have been there eight years. Go on and tell us why you think so.

Mr. MARTIN. On the ward I am on now there is 25 patients—the receiving ward. I have stated the class of patients that was on there. I think there ought to be at least four attendants there. There is three, and a nurse, and then the chief nurse that comes through there—practically you might say there is three attendants and two female nurses, and I think that is not sufficient. It is a very large ward, and we have lots of work to do there in caring for the sick, and those that are up. Sometimes I leave one man on the ward while I go in the dining room—that is while one of them is off a half day or so.

The ACTING CHAIRMAN. Do you think that increased help would result in benefit to the patients, and leave the attendants in better condition?

Mr. MARTIN. I do, sir.

The ACTING CHAIRMAN. How is the food out there?

Mr. MARTIN. Well, the food is fairly good.

The ACTING CHAIRMAN. Good butter?

Mr. MARTIN. No, sir; we have that oleo.

The ACTING CHAIRMAN. Oh! Oleo?

Mr. MARTIN. Yes, sir.

The ACTING CHAIRMAN. If you know anything about the mistreatment of patients out there, Mr. Martin, I wish you would tell us.

Mr. MARTIN. I know of not an instance, Mr. Chairman. If I did, I would have told you before this.

The ACTING CHAIRMAN. There is no disposition to conceal anything on your part?

Mr. MARTIN. None whatever, sir; because if anything should happen to come up that I was discharged over there, I know I could get something else to do. I am not afraid of my job.

The ACTING CHAIRMAN. You are not afraid of it?

Mr. MARTIN. No, sir; not because I have been there nine years; I am not afraid of it.

Mr. HAY. How often does the superintendent come through your ward?

Mr. MARTIN. Every Sunday, sir.

Mr. HAY. Every Sunday?

Mr. MARTIN. Every Sunday morning.

Mr. HAY. How often does the Board of Visitors go there?

Mr. MARTIN. I have seen them once since I have been in the new building. I went into the new building April 5, 1905.

Mr. HAY. You have seen them once?

Mr. MARTIN. Once in that building.

Mr. HAY. I do not mean the whole board.

Mr. MARTIN. I am speaking of this. They come through my ward from the administration building, or A building, as it is termed, and then they go through into the different parts.

Mr. HAY. Did you ever receive any Philippine soldiers in that ward?

Mr. MARTIN. I have, sir. I received most of them.

Mr. HAY. Were any of them ever affected with any contagious disease?

Mr. MARTIN. Not that I know of.

Mr. HAY. Did any of them have the itch?

Mr. MARTIN. They have had that itch, the dobe itch, as they call it.

Mr. HAY. What did you do with those patients? Did you segregate them or separate them from the others?

Mr. MARTIN. Yes, we put them in a room to themselves. We separated them.

Mr. HAY. Could other patients take this disease?

Mr. MARTIN. No, sir; we treated it as soon as we found it out.

Mr. HAY. I mean before you found it out, did they communicate it to any of the other patients?

Mr. MARTIN. No, sir; as soon as they came in there they were bathed, you understand.

Mr. HAY. What?

Mr. MARTIN. As soon as a patient is received on the receiving ward he is taken into the bathroom and bathed.

Mr. HAY. He is bathed in the same tub, I suppose, with all the others.

Mr. MARTIN. He is bathed in the same tub, but not in the same water.

Mr. HAY. Of course not; but I mean he is bathed in the same tub.

Mr. MARTIN. Yes, sir.

Mr. HAY. There is no ward there provided for anything of this sort, is there? There is no separate ward provided to quarantine these people, as it were, from the others?

Mr. MARTIN. No, sir.

Mr. HAY. How many cases of that sort have occurred?

Mr. MARTIN. I couldn't count them. I never kept a record of them.

Mr. HAY. How many do you think—half a dozen, or how many?

Mr. MARTIN. About twenty-five. More than that, I guess, that came in from those islands.

Mr. HAY. Twenty-five cases?

Mr. MARTIN. Yes, sir.

Mr. HAY. What is your pay? How much do you receive?

Mr. MARTIN. Forty dollars a month.

Mr. HAY. How much did you receive when you began there?

Mr. MARTIN. Eighteen dollars.

Mr. HAY. You have been gradually graded up?

Mr. MARTIN. Yes, sir.

Mr. HAY. Until you reached \$40?

Mr. MARTIN. Yes, sir.

Mr. HAY. Do you receive the same as all the people who occupy the same position you do?

Mr. MARTIN. Yes, sir.

Mr. HAY. You all receive the same pay?

Mr. MARTIN. Yes, sir.

Mr. HAY. You are in charge of a ward?

Mr. MARTIN. Yes, sir; I receive the same as those in charge. I am considered as in charge, because I graduated in 1903.

Mr. HAY. You are a graduated nurse?

Mr. MARTIN. Yes. The charge nurses receive \$40, but those in charge of wards receive \$35, if I am not mistaken.

Mr. HAY. When did you get your increase last? When were you raised to \$40? How long ago has it been?

Mr. MARTIN. That was in July, 1903.

Mr. HAY. You now have gotten as high as you can go?

Mr. MARTIN. Yes.

Mr. HAY. That is as high as is paid there?

Mr. MARTIN. Yes, sir. I go on duty in the morning at 6 o'clock and come off at 5 or half past 5 in the evening. Next evening I go on at 6 and come off at 8 or quarter after 8.

Mr. HAY. What do you think about those hours of work?

Mr. MARTIN. Those hours to me are long and tiresome and tedious.

Mr. HAY. You think they are too long to enable the attendants to give proper care to the people under their charge?

Mr. MARTIN. I do, sir.

Mr. HAY. It has been testified here that the gentlemen in charge of the institution think the hours of work ought not to be curtailed, because the responsibility over these patients should not be shared with anybody else. What have you to say about that, or do you know anything about that?

Mr. MARTIN. I don't see why it could not be evened up some way or another.

Mr. HAY. Do you think the patients would be worse treated, or at least worse cared for, if the men were to go on and stay on eight hours?

Mr. MARTIN. No; I do not.

Mr. HAY. And then go off eight hours and have somebody else come on?

Mr. MARTIN. No, sir; I don't. The night men over there work ten hours.

Mr. HAY. And you work ten hours. Do they have charge of a certain ward, or several wards?

Mr. MARTIN. There are two men on my ward. The rest of the wards have one man. One of them comes through the house.

Mr. HAY. Through the whole house?

Mr. MARTIN. Through the four wards. Four wards are included in the house.

Mr. HAY. Can one man do that and take care of these people under his charge?

Mr. MARTIN. I don't think he can, sir.

Mr. HAY. You do not think he can?

Mr. MARTIN. Not to look after 25 sick men—one man at nighttime.

Mr. HAY. How many are there in the four wards?

Mr. MARTIN. How many patients?

Mr. HAY. Yes.

Mr. MARTIN. Let's see. There is close onto 100 patients in the four wards.

Mr. HAY. And one man has charge of the four wards?

Mr. MARTIN. And those that are on night duty.

Mr. HAY. Can he properly look after all those four wards?

Mr. MARTIN. He just goes around and sees that the nurses and night men do their work.

Mr. HAY. Do their work?

Mr. MARTIN. Yes.

Mr. HAY. Of course he can do that.

Mr. MARTIN. Yes; he can do that part of it.

The ACTING CHAIRMAN. What do you know about since Doctor

White has been there? Has there been any separation or classification of patients—of epileptics, for instance, to any one ward or one building?

Mr. MARTIN. There has been, sir. They have been separated.

The ACTING CHAIRMAN. And different classes of lunatics have been separated, have they?

Mr. MARTIN. They have been separated.

The ACTING CHAIRMAN. Do you think that is a good thing?

Mr. MARTIN. I do, sir. I think it is an excellent thing.

The ACTING CHAIRMAN. You think it has resulted in benefit to the patients, and to the institution generally?

Mr. MARTIN. I do, sir.

The ACTING CHAIRMAN. Take the bug-juice fiends that come there. Are they put in with the people generally who are insane?

Mr. MARTIN. When you are speaking of bug juice, you have got a little ahead of me. I don't understand the question.

The ACTING CHAIRMAN. Where were you raised?

Mr. MARTIN. I was raised in the country.

The ACTING CHAIRMAN. In what State?

Mr. MARTIN. Right in the District—out in Prince George County.

The ACTING CHAIRMAN. That is another name out in our country for whisky. Now you understand the expression?

Mr. MARTIN. Understand that.

The ACTING CHAIRMAN. When a fellow comes there who is very drunk—

Mr. MARTIN. You are speaking about when he first comes there?

The ACTING CHAIRMAN. Yes.

Mr. MARTIN. He is put on a receiving ward and given a single room there.

The ACTING CHAIRMAN. I suppose ordinarily with that class of patients the recovery is rapid, is it not?

Mr. MARTIN. Yes.

The ACTING CHAIRMAN. Their chief disturbance is perhaps what we call delirium tremens?

Mr. MARTIN. Yes. We have had them sometimes to go for a couple of months over there.

The ACTING CHAIRMAN. They would not let them go until they were actually fully recovered?

Mr. MARTIN. No, sir; I don't think Doctor White would let anybody of that sort go until he had fully recovered.

Mr. HAY. How long do the patients stay in the receiving ward?

Mr. MARTIN. Sometimes three weeks or a month; something like that.

The ACTING CHAIRMAN. Is there any classification in the receiving ward?

Mr. MARTIN. No, sir.

The ACTING CHAIRMAN. They are there for purposes of observation?

Mr. MARTIN. Yes, sir; observation.

The ACTING CHAIRMAN. Until they can properly be observed?

Mr. MARTIN. And separated.

The ACTING CHAIRMAN. Until the peculiar character of their insanity is observed, and then they are separated and assigned to their proper wards?

Mr. MARTIN. That is it exactly.

The ACTING CHAIRMAN. Is that proper, do you think?

Mr. MARTIN. I think it is, sir.

The ACTING CHAIRMAN. I suppose you can not well obviate that, can you?

Mr. MARTIN. I think not, sir.

The CHAIRMAN. Mr. Evans, did you say you wished to put Miss Griffin on the stand again?

Mr. EVANS. Yes, sir.

ADDITIONAL TESTIMONY OF MISS NANNIE H. GRIFFIN.

MISS NANNIE H. GRIFFIN, who had been previously sworn, was examined, and testified as follows:

Mr. SMYSER. Miss Griffin, were you there when your mother was taken to the hospital? Did you go with her?

Miss GRIFFIN. No, sir; my brother and Doctor Thompson and my sister-in-law, from Baltimore.

Mr. SMYSER. When did you see her? How soon after she was taken there?

Miss GRIFFIN. I saw her the next day—on Friday.

Mr. SMYSER. Where was she; in the receiving ward?

Miss GRIFFIN. She was in Elm ward, in the center building.

Mr. SMYSER. Is that what was called the receiving ward; do you know?

Miss GRIFFIN. Yes, sir; I think so.

Mr. SMYSER. How was she treated there that day when you first saw her?

Miss GRIFFIN. When I saw mamma she was in the room with the window stretched wide open, the cold air blowing in on her. She was in her bare feet, which she had never been used to. She was exposed to the cold air. The doctors outside had told me that mamma had tuberculosis, and she was treated just like a baby at home. My sister and I cared tenderly for her, and when we went over and found her with nothing in the world but her nightdress on and in her bare feet it almost broke my heart, because mamma was never used to such treatment as that.

I suppose they decided it would do mamma good to have her dressed in her nightdress, with bare feet, and she was walking on the bare floor, without any slippers whatever. At home mamma had been quite ill. Just before she left home she had a very severe case of illness, and when Mark Hanna died my mother was very low, with catarrhal fever, as Dr. M. F. Thompson said, and he said mamma had to be kept very quiet. She came very near dying. She was just as low as she could be. We had to go out and stop the newsboys on the street from hollering, and when mamma got up out of bed she began to walk. She was quite nervous, and we had Dr. M. F. Thompson and Dr. George Warren in attendance, and Dr. Warren told me that mamma was getting along poorly. I said, "Oh, Doctor, don't tell me anything like that, because it will break my heart to take mamma away from me. She is all I have"——

Mr. SMYSER. We have called you back, Miss Griffin, as to what occurred at the hospital.

MISS GRIFFIN. I will tell you what occurred. For three weeks after mamma landed in St. Elizabeth's hospital we were not allowed to see her. Doctor Clark thought it was detrimental for us to see mamma. In the three weeks mamma was in the hospital she had three ribs fractured. She was put in a rest sheet. This rest sheet has a pocket. Her hands were down in it, and the sheet came up around her throat, and there were brass rings this large [indicating] in the back. She had cords that laced up the back.

MR. SMYSER. You described all this before.

MISS GRIFFIN. No, sir; I never described this before, only in the affidavit. Not on the stand, I did not.

MR. SMYSER. I beg your pardon. Go ahead.

MISS GRIFFIN. Mamma had the three ribs fractured, and Dr. Clark stated that mamma had her ribs fractured at home. I have two certificates here from two physicians, Dr. M. F. Thompson and Dr. George Warren, stating that my mother had nothing of the kind when she left our home. Shall I read them?

THE CHAIRMAN. Did you see your mother when her ribs were fractured?

MISS GRIFFIN. No, sir; we saw them afterwards. Mamma had plasters across her ribs here, and Dr. Clark told us mamma's ribs were fractured.

THE CHAIRMAN. Did you see her when she had this rest sheet on?

MISS GRIFFIN. Yes, sir; I did. My sister and I took the rest sheet off. The nurse came in and took the rest sheet off, and I told them if ever a rest sheet went on my mother again, I would cut it off with the scissors.

THE CHAIRMAN. How is that put on? Is it tied on one side of the bed and pulled over the patient and tied on the other side?

MISS GRIFFIN. Yes, sir. This jacket was placed on my mother's bare skin, and it was laced up with this corset lace, or a lace as thick as my finger. Mamma had the scars where these rings were buried in her back. Since then, the 17th of January, she had her hip fractured by falling on the floor.

THE CHAIRMAN. How long was your mother there?

MISS GRIFFIN. Two years; and we have been there every day since she has been there, and stayed until 10 and 11 o'clock at night, and sometimes 12. We were allowed to stay with mamma.

MR. HAY. This sheet is made of heavy canvas, is it?

MISS GRIFFIN. Yes, sir.

THE CHAIRMAN. The sheet is made of canvas?

MISS GRIFFIN. Yes, sir.

THE CHAIRMAN. Was it not just like the regular bed sheets?

MISS GRIFFIN. No, sir; it is not like a bed sheet. It is very thick—canvas.

THE CHAIRMAN. Did you see that on your mother?

MISS GRIFFIN. Yes, sir; I saw that on my mother. We took it off of mamma.

MR. SMYSER. Who was present when you took it off?

MISS GRIFFIN. The nurse.

MR. SMYSER. Who was she?

MISS GRIFFIN. I forget which nurse was on. I think Miss Beach was on at that time. Miss Cusick was the head nurse.

Mr. SMYSER. You were a good deal incensed at seeing your mother in that condition?

Miss GRIFFIN. Yes, sir; I was, with her ribs fractured and her nose bruised. Her throat was blackened and her knees were all bruised, and the skin was off, from the rest sheet, where she had worked her knees up and down. Her leg was all skinned, and she had a black bruise on her breast here, because they locked mamma in a dark room, without any light, because they hadn't enough attendants to take care of her. There is not enough in the ward to take care of her.

Mr. SMYSER. Did you complain to anybody about this?

Miss GRIFFIN. Certainly. I went to Dr. Clark and told him.

Mr. SMYSER. What did he say?

Miss GRIFFIN. Dr. Clark did the best he could.

Mr. SMYSER. What did he say when you told him?

Miss GRIFFIN. I told him about the rest sheet, and it never went on mamma any more. They never put it on any more.

Mr. SMYSER. When you told him what you had seen, what did Doctor Clark say?

Miss GRIFFIN. Doctor Clark didn't tell me how it was done.

Mr. SMYSER. Did he say anything?

Miss GRIFFIN. No, sir; he didn't tell me anything about how the bruises became on mamma. She had her face swollen.

Mr. HAY. What we want to know, Miss Griffin, is as to whether Doctor Clark said it should not occur again, or that it ought not to have occurred, or what.

Miss GRIFFIN. Yes, sir; he said it should not occur again.

Mr. HAY. Did he say it ought not to have occurred at the time it did?

Miss GRIFFIN. Yes, sir.

Mr. HAY. Did he say whether he had ordered it put on, or whether it had been put on with his knowledge?

Miss GRIFFIN. Yes, sir; it was put on under his instructions. He was on mamma's ward, in charge of her. I suppose mamma walked a good deal, and they wanted to keep her in bed. Then her ribs were fractured. I suppose they did it on that account. She walked quite a good deal. She was quite restless and nervous.

The CHAIRMAN. How long was this after she had been there?

Miss GRIFFIN. Three weeks. We wouldn't stay out any longer.

The CHAIRMAN. Did you ever have any trouble at home with your mother?

Miss GRIFFIN. No, sir; not a bit. She was very restless, and walked for three weeks, and I walked by the side of her. I never closed my eyes for three weeks, night or day, because mamma was very restless. She walked a great deal, and I was right by her side all the time. I never left her—my sister and I both.

Mr. HAY. Did you not say in your former testimony that she had her hip broken?

Miss GRIFFIN. Yes, sir; the 17th of January. I mentioned that a while ago, but you didn't hear me.

The CHAIRMAN. While she was in the asylum?

Miss GRIFFIN. Yes, sir. The nurse left her, and she got up out of bed and wrapped a blanket around her, put her own slippers on, walked down in the dormitory, about 5 o'clock in the morning, and

there she fell on the slippery floor. I don't know whether she fell over the chair or the heater. There were rocking chairs in the way and a heater, and there she fell and fractured her hip. She hasn't walked since. That has been over three months—the 17th of January.

The CHAIRMAN. You have told us that before, have you not?

Miss GRIFFIN. Yes, sir.

The committee, at 4.15 o'clock p. m., adjourned until Saturday, May 19, 1906, at 10 o'clock a. m.

HOUSE OF REPRESENTATIVES,
Washington, D. C., May 19, 1906—10 o'clock a. m.

The committee met pursuant to adjournment.

Present: Messrs. Olcott (chairman), Smyser, Barchfeld, Hay, and Wallace; also, Doctor William A. White, Stuart McNamara, Richard P. Evans, and others.

TESTIMONY OF DR. CHARLES H. CLARK.

Dr. CHARLES H. CLARK, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Doctor Clark, you are connected with the St. Elizabeth's Asylum?

Doctor CLARK. Yes, sir.

The CHAIRMAN. What is your position there?

Doctor CLARK. At present I am clinical director of the hospital.

Mr. SMYSER. What are your initials, Doctor?

Doctor CLARK. Charles H.

The CHAIRMAN. Where did you study medicine?

Doctor CLARK. At Columbus, Ohio, in the Starling Medical School.

The CHAIRMAN. When were you admitted to practice?

Doctor CLARK. March 9, 1893.

The CHAIRMAN. Have you been connected with other institutions than St. Elizabeth's?

Doctor CLARK. Yes.

The CHAIRMAN. What are they?

Doctor CLARK. This is the fifth institution with which I have been connected.

The CHAIRMAN. Name the others, if you please, chronologically.

Doctor CLARK. The first hospital was a general hospital. I was house physician at St. Francis Hospital, Columbus, Ohio, for about a year. For about four and a half years I was first assistant physician at the Ohio Hospital for Epileptics, at Gallipolis, Ohio. I was second assistant physician in the Columbus State Hospital for the Insane, at Columbus, Ohio. I was first assistant in the Massillon State Hospital, Massillon, Ohio, for eighteen months, and I have been ranking as assistant physician until April 1, 1906, in the Government Hospital for the Insane—since December 17, 1899, a little over six years.

The CHAIRMAN. When did you come to St. Elizabeth's?

Doctor CLARK. In 1899, December 17.

The CHAIRMAN. Have you been there continuously ever since?

Doctor CLARK. Yes.

The CHAIRMAN. Who was the superintendent of St. Elizabeth's when you went there?

Doctor CLARK. Doctor Richardson.

The CHAIRMAN. Name the superintendents of the hospitals with which you were connected before you went to St. Elizabeth's. For instance, who was the superintendent at Massillon?

Doctor CLARK. Doctor Richardson was superintendent while I was there, and I had charge of the institution for a couple of months during the interval between his leaving the hospital and the selection of a new superintendent. Dr. H. C. Eyman was appointed, and I was with him for a few weeks.

Mr. SMYSER. You were in charge during that interregnum?

Doctor CLARK. Yes, sir.

The CHAIRMAN. And from Massillon you came here?

Doctor CLARK. I came here; yes, sir.

The CHAIRMAN. Tell me the names of the superintendents of the hospital you were in prior to the one at Massillon, will you?

Doctor CLARK. Doctor Richardson was superintendent of the Columbus Hospital while I was there, with the exception of one month, and then Doctor Carpenter was superintendent, and at the hospital for epileptics Dr. H. C. Rutter was superintendent.

The CHAIRMAN. So that there were three institutions in which you were under Doctor Richardson?

Doctor CLARK. Three institutions; yes, sir. Doctor Richardson was appointed by the governor of Ohio to organize and establish this Massillon Hospital. It was a new institution. He asked me to go with him as assistant physician from the Columbus State Hospital, and after he received his appointment here in Washington he had a vacancy on his staff in the Government Hospital for the Insane.

His first assistant physician at that time was Doctor Whitmer, who was quite ill, and he called upon the Civil Service Commission for a physician. They had no man on the eligible list; in fact, they had never held an examination for assistant physician at the Government Hospital for the Insane up to that time. They, however, granted him permission to make a temporary appointment, with the understanding that in the meantime they would advertise and hold a competitive examination. That examination was held the 6th and 7th of February, 1900. I received the temporary appointment, took the civil-service examination, and having qualified I received the permanent appointment.

The CHAIRMAN. Did you take the civil-service examination when you came here?

Doctor CLARK. Yes, sir.

The CHAIRMAN. That was a competitive examination also, was it?

Doctor CLARK. Yes, sir.

Mr. SMYSER. Who was the superintendent at Gallipolis, Ohio?

Doctor CLARK. Doctor Rutter was superintendent there.

The CHAIRMAN. What did you say your exact position is now, in St. Elizabeth's?

Doctor CLARK. Since the 1st of April, 1906, I have been clinical director of the hospital. I was appointed clinical director of the hospital. This is a position that was created at the semiannual meeting of the board of visitors, upon the recommendation of Doctor White,

and he promoted me to that position. I was ranking then as second assistant physician.

The CHAIRMAN. Do you rank now as first assistant physician?

Doctor CLARK. No; I rank now as clinical director.

The CHAIRMAN. What are your duties there now?

Doctor CLARK. My duties—I would rather read you the duties, as prescribed by Doctor White.

The CHAIRMAN. Did you become clinical director as the result of a civil-service examination?

Doctor CLARK. No, sir; it was simply by promotion. It is a new position, a position that was created, and I was advanced to that position from the staff.

The CHAIRMAN. What are duties now, as clinical director?

Doctor CLARK. With your permission, I will read you the duties as prescribed by Doctor White.

The CHAIRMAN. Certainly.

Doctor CLARK. Doctor White has outlined them in this way:

Duties of clinical director.

1. The clinical director shall have general supervision of the medical care and treatment of the patients.

2. To this end he shall have general charge of—

(a) Hydrothereapeutic department.

(b) The operating room.

(c) The training school for nurses.

3. He shall have general supervision over all clinical records for the purpose of satisfying himself that they are properly and adequately kept, and that there is a uniform method in use in the different departments of the hospital, and that a proper amount of attention is paid to this matter in each department.

4. He shall visit each of the wards of the hospital not less frequently than once in each calendar month, and oftener as occasion may require, and shall file in this office a report of the results of such visits, together with such recommendations as he may see fit to make.

5. He shall see all new patients admitted to the hospital within a period of one week from their entrance therein.

6. All transfers of patients from one service to another shall be referred to him for approval, and he may upon his own motion and after consultation with the physician in charge of the service make such further transfers as he in his opinion may deem advisable for the best interests of the patients.

7. He shall be relieved of all administrative duties other than those set forth herewith, to the end that he may have a sufficient amount of time to keep thoroughly posted in the literature of insanity especially with reference to matters bearing upon the care and treatment of the insane.

8. By thus keeping abreast of the progress that is being made in psychiatry he will be in a position to institute, with the cooperation of the physicians in charge of the services, new methods of treatment which seem to be warranted by the experience of others and which seem to offer advantages over old methods or better hopes in the matter of results.

9. For the purposes of carrying out methods of treatment or for the purpose of observation of special classes of cases he shall have authority to accumulate patients for observation and treatment from the different services upon one ward, and it is suggested that this observation ward be located for the women in building C, and for the men in building B.

10. It shall be his duty, so far as circumstances permit, to keep a careful record of new observations and methods of treatment which may be made from time to time with a view to observing any new facts in the clinical aspects of psychiatry on the one hand, and on the other with a view to determining the exact results of treatment.

Mr. SMYSER. Have you any extra copies of that, Doctor?

Doctor CLARK. No, sir; that is the only copy.

The CHAIRMAN. It will go in the record.

Mr. HAY. When was the semiannual meeting held at which this position was created?

Doctor CLARK. It was held on the first Tuesday in April.

Mr. HAY. Of this year?

Doctor CLARK. Yes, sir.

The CHAIRMAN. As I understand it, this statement of your duties was prepared by Doctor White at the time you were appointed the clinical director?

Doctor CLARK. Yes, sir; he outlined some of the duties, and this constitutes a number of them. The position is a new one, and it remains to be seen just what can be done with the position.

Mr. SMYSER. You say it is new? How long, if such a thing is true, was the establishment or creation of this place under consideration out there?

Doctor CLARK. Doctor White made the first recommendation for this position in his annual report in 1904.

The CHAIRMAN. And when was his recommendation adopted by the Board of Visitors?

Doctor CLARK. April, 1906.

The CHAIRMAN. And you were appointed immediately thereafter?

Doctor CLARK. Yes, sir.

Mr. SMYSER. You say he made that recommendation in 1904. Was that recommendation written or verbal, or both?

Doctor CLARK. It was written. It is contained in the annual report. On page 17 of the annual report of 1904 there is a paragraph which reads—

Mr. SMYSER. Just read it, will you?

Doctor CLARK. It reads:

During the past year staff meetings have been regularly held with a view solely to the discussion of medical topics, either having a direct bearing on psychiatry or upon the broader lines of medical advance in other fields. These meetings have been eminently successful and satisfactory, but the need is felt of an expert clinical psychiatrist to act as chief of clinic, who can organize and direct the clinical work of the medical staff, and not only take the burden of the details connected therewith from the superintendent, but devote more time to the problems involved than he could.

This recommendation is in line with what is believed to be the best ideals in modern hospital administration, and is directed solely to the welfare of the patients, which should be the main and ever-present issue in an institution for the care and treatment of the insane.

Mr. SMYSER. That is contained on page 17 of the report of 1904?

Doctor CLARK. Yes, sir.

The CHAIRMAN. Doctor, the first paragraph of this statement of your duties is that you shall have general supervision of the medical care and treatment of the patients. How many physicians are there under you to assist you in this work?

Doctor CLARK. The institution is divided into departments. We have five different departments. Each department has a senior physician, and each senior physician has one or more assistants—generally one assistant. Then we have the pathologist with his assistant. We have, all told—I always have to count them up—

The CHAIRMAN. Yes, sir.

Doctor CLARK. I think we have eleven physicians on duty at the present time.

The CHAIRMAN. Six of them report directly to you; that is, the pathologist and the physicians at the head of the five different departments. If they have any reports to make they would report directly to you, would they not?

Doctor CLARK. In the matter of transferring patients from one department to another they report directly to me, and I make a round with the physician in charge of the department at least once a month. So far I have managed to get through the institution twice a month. In April I went through the entire department twice. During this month I have been able to get through the entire department—every ward in which we have patients—once. I see and converse with a great many of the patients during this call, and make such recommendations or notes about the care and treatment as I think is proper. Then in the event that the physicians have patients that they want to survey, patients that are fairly well recovered, and that should be discharged from the hospital, they call those patients to my attention, and I make a mental examination of the patients and recommend their separation from the hospital, or discharge, or their continuance for further treatment or further observation, as the case may be.

The CHAIRMAN. What is the hydrotherapeutic department? Will you tell us in—

Mr. SMYSER. In farmer language.

The CHAIRMAN. Yes; in less technical language.

Doctor CLARK. That is really the application of water for the cure and alleviation of disease.

The CHAIRMAN. Under that head comes spray baths, douches, and things of that kind?

Doctor CLARK. Yes; packs, spray baths, douches, shampoos, massage, hot boxes, sitz baths, etc.

The CHAIRMAN. Is it the idea of the gentlemen in charge of this hospital to eventually do away entirely with tubs, as a method of bathing?

Doctor CLARK. Do you mean for the purpose of cleanliness?

The CHAIRMAN. Yes.

Doctor CLARK. It would be impossible to do away with them entirely. Able-bodied patients can always be bathed by the shower-bath system, but feeble patients generally have to use the tub bath. In all parts of the institution where we have feeble patients we have the tub bath. In the cottages and wards where we have able-bodied patients we have the shower system.

The CHAIRMAN. You spoke of there being five particular departments. Will you tell us what those are?

Doctor CLARK. The first may probably be designated as the receiving department—that is, it is the department in which all the men patients are admitted. Their principal ward is that large hospital ward to the north of the administration building. All the patients admitted to the institution are received in that building, and are kept there for observation.

From there they are sent to various parts of the institution. In this receiving department we have connected with it the old building—especially the west side of the old building. The east side is not occupied at the present time. It is being put in order for the reoccupancy of patients. The east side is occupied by women

patients. They are all transferred to the new department, and it vacates a great many wards there. They are being put in better sanitary condition before they are reoccupied. Doctor Stack is in charge of the receiving department. The second department would be the Richardson group—the four buildings across the road on the east side of Nichols avenue—and that is in charge of Doctor Logie. Then we have detached buildings, the buildings that are within that inclosure, and Doctor Hummer has charge of that group of buildings and patients. Then we have Howard Hall group, under Doctor Schwinn; and then the women's department under Dr. Mary O'Malley.

The CHAIRMAN. These five departments, then, are divisions which merely contain certain groups of buildings. The five departments does not mean that the patients in them are affected in different ways, does it?

Doctor CLARK. To some extent, it does—it means the classification of the patients.

The CHAIRMAN. It is more as to the classification of the patients that I want to get at, rather than as to the mere groups of buildings.

Doctor CLARK. Yes.

The CHAIRMAN. Now go back to the first one you mentioned—the receiving department. How long do patients stay in the receiving department? How long is it necessary to keep them there, so that your examination can be completed?

Doctor CLARK. They may only remain there a few days. We get all classes there. We may have cases of senility, cases of paresis, maniacal disturbance, and insanity in all forms. We admit a great many people, and we can not keep them all there. After they have been examined, the cases of senility, and bed-ridden cases, are sent to other parts of the institution where we have bed-ridden men. Cases of young men, for instance, are kept under observation for a few weeks, or maybe even months in some cases. Then they are transferred to another building—probably to one of the Dawes wards—and then he may be advanced to Dawes 2d and 3d, and to the Oakes ward.

The CHAIRMAN. As I understand it, the reception department receives patients of all sorts, kinds, and conditions?

Doctor CLARK. Yes.

The CHAIRMAN. There is a male subdepartment there, and a female subdepartment?

Doctor CLARK. Yes.

The CHAIRMAN. Do you, in your position as clinical director, have supervisory authority over the female portion of the receiving department?

Doctor CLARK. Yes.

The CHAIRMAN. You consult with Doctor O'Malley, who is the immediate head of the department, just as you do with physicians in the other part?

Doctor CLARK. Yes.

Mr. SMYSE. It is from there that your classification probably begins?

Doctor CLARK. Yes, sir.

The CHAIRMAN. They are kept there such time as you believe it necessary for them to be there?

Doctor CLARK. Yes.

The CHAIRMAN. Some are kept there a few days, and some as long as two or three months?

Doctor CLARK. Yes, sir. The idea of the Superintendent, and our idea, is to make these two hospital wards on either side of the administration building what we might designate as psychopathic wards for acute recoverable cases of insanity.

In those two buildings we have a hydrotherapeutic department, and those patients really need the treatment. They are the most favorable class of patients; and it is our aim to keep most of the young men there in the building so they can go to the basement and take the treatment. If they were transferred across the road or to the old main building it would necessitate bringing them back to this building for treatment. The aim is to keep as many young men in the ward as possible. As to the old men, after we have examined them and come to the conclusion that they are probably incurable, they are transferred to the sick wards in the institution, and we have a great many. If we discover a case of tuberculosis it is isolated and transferred to the tubercular ward. We have two of those wards, a ward for suspected cases and a ward where they are sent when we know they are active cases—that is, when it has been positively proven that they have tuberculosis.

The CHAIRMAN. In the acute cases the patients are kept in the receiving ward until they are cured?

Doctor CLARK. Some of the patients may never leave that ward until they are cured; yes, sir.

The CHAIRMAN. Have you one building for tuberculosis patients?

Doctor CLARK. Yes, sir; we have one building for men and one for women.

The CHAIRMAN. Have you one for men and one for women for suspected tubercular cases?

Doctor CLARK. No; we have not a suspected ward for women. We have what you might designate as an active ward. All the cases there are known to be tubercular. For the men we have one ward where they are simply suspected cases—that is, where it has not been proven by a microscopical examination of the sputum that they have tubercular bacilli in the sputum.

The CHAIRMAN. Do you put them in the same ward with the proven tubercular patients?

Doctor CLARK. No; they are in a separate ward.

The CHAIRMAN. You keep them there until it has been determined positively whether or not they are really affected with tuberculosis?

Doctor CLARK. Yes.

The CHAIRMAN. Have you a separate ward for epileptic cases?

Doctor CLARK. Yes; we have the epileptics isolated. We have a cottage for the women epileptics; and we have a few patients there that are not epileptics, but feeble-minded children. Feeble-minded children we generally classify with the epileptics. We have a separate ward for epileptic men and have most of our epileptics in that ward.

The CHAIRMAN. Will you mention the other classes of patients who are separated and put in separate wards—both male and female?

Doctor CLARK. I will analyze that. I will start across the road

on the east side of the ward. There are four buildings there. The first is Building R. There are four wards. Three of the wards contain bedridden patients. All of the patients in the three wards are bedridden and mostly old men. In one of the wards you might designate the patients as semibedridden. They are up and down. Some days they may spend all day up, and some days they may be confined to bed. Each ward, I think, holds 36 patients. Then in cottages I and N we have an able-bodied class of chronic cases—men who are fairly quiet and well behaved—and they occupy these two wards. In P Building, which is a very large building with four wards, we have rather a chronic class of disturbed men—about 32 patients to the ward. That is the analysis of the patients in the Richardson group.

In the women's department we have receiving wards divided up. The first floor is divided up into acute cases and suicidal cases, and the second ward is a more quiet class of acute cases. As they improve they can be transferred. When we become filled upstairs in the wards, they are moved in the same building. There are two wards upstairs. Then we have a cottage for epileptics, and one ward. We have the Q building with four wards, where we have disturbed colored and white patients. We have two wards on the first floor for the white, and two wards upstairs for colored patients. These wards hold thirty patients each, except that the colored wards upstairs take 40 each. In the Toner Building we have three wards, one ward being entirely devoted to feeble, bedridden white women patients. All the patients in this ward are bedridden cases.

In Toner 2, in the same building, are semibedridden patients, part in bed and part of them up. Some days you will find probably the greater part of them up, and the next day several of them will be in bed. They are a feeble class of patients. Upstairs in Toner 3 we have about thirty-four patients who are fairly able-bodied, a chronic class of cases. In the convalescent ward, Cottage Q, we have about thirty-five able-bodied patients, quite a number convalescing. Quite a number are chronic cases, but they are quiet and orderly people.

The CHAIRMAN. When you use the word "convalescent" do you mean in regard to diseases other than mental diseases?

Doctor CLARK. I use that word as referring to mental diseases. If they have physical diseases, and if they were confined to bed, they would not be in this ward. Then we have cottages J and K. J contains about 66, and K about 45 patients—a chronic class of patients.

That analyzes the women's department. That is the white portion. Then we have two receiving wards for colored women, which will hold 11 patients each. Then we have one very large ward for colored women. There are about eighty-six patients in there. We have one ward for bedridden colored women. There are about 18 in that ward. Then we have a ward of about fifty people, being rather an able-bodied class of colored women, who work mostly in the laundry.

In the detached buildings we have about 640 patients; and four of the wards known as the "Allison" buildings, or "Allison" wards, are mostly occupied by bedridden patients. You gentlemen were through those wards. Most of the patients in those four wards are bedridden. That includes the tubercular wards also. The rest of the wards in that building are occupied by a chronic class of patients,

who take their meals in the general dining room. Then we have the Howard Hall group. In Howard Hall proper we have the criminal insane, and we have colored insane. They have a separate building, West Lodge. There are three wards in West Lodge. The first and second are devoted to the acute class, and the East Lodge is devoted to chronic cases; and the tubercular ward for colored insane, a separate building.

The CHAIRMAN. How many criminal insane are there in the hospital?—A. There are about 140 men in that ward. We divide the patients into three classes. First, we have quite a number of men there under sentence, or rather serving sentence, who are insane and under sentence.

Mr. SMYSER. Are many of those under sentence actually insane?

Doctor CLARK. I have not made a mental examination of all of them, but I would say that as a class they are all insane. There may be an individual here and there feigning insanity, but I have not discovered him as yet. We have a number that are under indictment.

Mr. SMYSER. Let me ask one other question in that line. They come to you under conviction, or rather they are excused from the consequences of crime on the ground of insanity?

Doctor CLARK. A few of them. Then there are a number who are indicted, and if they recover from their mental disease they will be returned to the jurisdiction of the court for trial.

The CHAIRMAN. You mean there are some who have been indicted who have never been tried. How do they get there?

Doctor CLARK. We receive the criminal insane from the District, Territories, the West, and the Army and Navy and Marine-Hospital Service.

The CHAIRMAN. In the case of these men under indictment, have they been accused of crime and indicted, and a mental examination had by order of the court, and then if the report shows they are insane are they sent to you?—A. Yes, sir.

Mr. HAY. Then you receive them also from the various Federal prisons?—A. Yes, sir.

The CHAIRMAN. Those are men who have been convicted, of course.—A. And we receive, for instance, criminals from the District of Columbia who are confined at Moundville. In case some of those men become insane they are transferred from there back to St. Elizabeth.

The CHAIRMAN. Where is Maple Ward?—A. I have mentioned the receiving department. The receiving department is under Doctor Stack. He has charge of B building—that is the hospital building for men—the receiving ward and the old main building. That is occupied, on the west side, by patients. There are fourteen wards in that building, and Maple Ward is one of the wards in that building. Maple Ward has been set apart for army and navy officers.

Mr. HAY. How many people are in that ward?—A. I think at the present time there are 6 or 8 there—about 6.

Mr. HAY. Are there any persons in that ward who have been indicted by a court?—A. Not to my knowledge.

Mr. HAY. Is Doctor Hagner in that ward?—A. Yes.

Mr. HAY. Is not Lieutenant Howard in that ward?

Doctor CLARK. I do not recall him at all.

Mr. HAY. Do you know who are in that ward?

Doctor CLARK. No, sir. I would not know. I just took charge of

that department, and I do not know the patients. I do not know many of the men patients at all. People in that ward have parole.

Mr. HAY. And can go and come as they please, pretty much?

Doctor CLARK. The door is always unlocked, and they go in and out as they please. They have to live up to the regulation hours of the institution—have to report at meals and go to bed at 8 o'clock at night.

Mr. HAY. They are what is known as on parole?

Doctor CLARK. Yes. I might add that Cottage L, for white men, convalescent patients, is an open ward. There are 35 patients, and they go in and out as they please.

Mr. HAY. Have you a separate ward for insane females—

Doctor CLARK. No, sir; we have not.

Mr. HAY. You have not.

Doctor CLARK. We have very few insane females—

Mr. HAY. Criminals, I mean?

Doctor CLARK. We have very few.

Mr. HAY. They are not segregated, to themselves?

Doctor CLARK. No, sir.

Mr. SMYSER. Why do you parole?

Doctor CLARK. Why do we parole?

Mr. SMYSER. Yes, sir.

Doctor CLARK. Well, we believe in the most humane treatment of the insane, and just as soon as a patient becomes convalescent we put him on his own responsibility to see what he can do. If he can not do well in the institution, he can not do well outside. We give them the privilege of the grounds and watch their conduct and behavior on the grounds. That is preparatory to dismissal or discharge from the hospital. If they conduct themselves well under parole, we take up the case and discharge them.

The CHAIRMAN. How many patients in the hospital are on parole?

Doctor CLARK. We probably have in the neighborhood of two or three hundred. I would not say 300, but 200 at least.

Mr. SMYSER. Has that been the number, approximately, since you have been there?

Doctor CLARK. Yes, sir; we have had about the same number.

Mr. SMYSER. How many of these paroles, then, are discharged?

Doctor CLARK. Discharged annually?

Mr. SMYSER. Yes.

Doctor CLARK. I do not know just the number that are discharged; but our rate of discharge is about the same as at other institutions—between from 25 to 35 per cent of those cases are discharged annually as recovered. We also discharge quite a number as improved, and occasionally discharge some as unimproved.

The CHAIRMAN. Do you mean that you transfer them to other institutions?

Doctor CLARK. They leave for some cause or other. We get a great many nonresidents at the hospital, and they are transferred back to the States from which they came. We simply discharge them from our records as unimproved. That is simply to complete our record.

Mr. HAY. They are not under parole?

Doctor CLARK. They are not patients that have been under parole.

The CHAIRMAN. You mean that they go to other institutions in their respective States?

Doctor CLARK. Yes, sir. Congress makes an annual appropriation

for the transfer of patients or for bearing the expenses of patients who come from other States to the District. When that matter was taken up by the District Board of Charities I think we had something like 300 nonresident patients in St. Elizabeth's. We had an accumulation of years—so-called White House cranks, etc. We had a great many people who had really lost their identity.

I think when the Committee on Appropriations went through the hospital the other day one of the Representatives recognized a woman from Tennessee. It was the first time we knew where she was from. She had been in the institution fifteen years. They are, of course, an expense on the District, and they rightfully belong in their home State. As soon as we can locate the friends of these people we communicate with them, and if their friends will not take them we force them back to the institution in their district. We get rid of a great many patients annually in that way. Hardly a week passes that we do not send two or three people away, and they are transferred back to some State.

MR. SMYER. Have you any aid in the way of a District official to aid you in locating their friends and sending them back?

DOCTOR CLARK. Yes; one man connected with the District Board of Charities assists us. That is his entire work. I believe—the looking up of friends of these people.

THE CHAIRMAN. Of course it is your desire, I suppose, to transfer all these people that can be transferred, so as to reduce the expense to the District of Columbia?

DOCTOR CLARK. Yes, sir.

THE CHAIRMAN. And they should be properly cared for by the States. Or, if you find people that can properly care for them your desire is to send them away from this institution, and let them be taken care of either by private individuals or by the States from which they come?

DOCTOR CLARK. Yes, sir. In that connection I can cite a very interesting case. The first day Doctor Richardson went through the female department a lady came up and spoke to him, and called him by name. He did not recognize her. He got to talking with her and she says "I was a patient of yours at Athens, Ohio, about fifteen or eighteen years ago." He learned her name and we communicated with her friends. They thought the woman was dead. She had been away from home for fifteen years. They were here after her in a week. She had been an expense to the District for fifteen years. She never wrote a letter in all that time, and would not communicate with any person. She would not tell the State from which she came. As soon as she saw Doctor Richardson she recognized him. She was in his institution at Athens. She ran away from the Athens hospital and came to Washington. She was here a few days when she was taken up by the police and sent to St. Elizabeth's, where she remained for fifteen years.

MR. SMYER. Was she regularly committed?

DOCTOR CLARK. I suppose she was.

MR. SMYER. I mean in St. Elizabeth's?

DOCTOR CLARK. Yes, sir.

THE CHAIRMAN. Doctor, with reference to the training school for nurses mentioned here, how many nurses are there in the training school?

Doctor CLARK. We have two classes, the senior and the junior class. The senior class has about 8 members. We have from about 12 to 14 who generally start out with the class—sometimes 20—but before the year ends they drop out. Some resign and leave the hospital, and it generally dwindles down to 12, I think about 12, in the junior class at the present time, and 8 in the senior class.

The CHAIRMAN. Those women are employed as nurses in the hospital while they are pursuing their studies?

Doctor CLARK. They rank as attendants while they are pursuing their studies. It is voluntary on their part to take up the training. The opportunity is offered to them, and we offer to the nurses, as an inducement, better pay than the attendants get. By taking the complete course of training they get more money. They get the extreme in our wages. If they do not, we show some favoritism to the nurses. If they take the training and complete the course, they will be ordered to the best wards and receive the best pay, and those who do not take the training will be kept back, and we allow the nurses to get ahead of them.

Mr. SMYER. You do not use the word "favoritism" in an offensive sense?

Doctor CLARK. No, sir. It is done in accordance with the merit system entirely.

The CHAIRMAN. The nurses who are studying there go in as attendants and get the same pay?

Doctor CLARK. Yes.

The CHAIRMAN. And if they graduate, and have taken the course, they then become nurses, which pays more than is received by those who are simply attendants?

Doctor CLARK. Yes, sir.

The CHAIRMAN. Do you instruct them in other ways than in the mere practical attendance upon patients? For instance, are lectures delivered to them?

Doctor CLARK. Yes, sir; by each one of the senior physicians. The senior physicians have charge of the lectures for the senior class. For instance, Doctor Stack lectures on mental diseases. I lecture on accidents and emergencies; Doctor Logie lectures on the subject of the application of water and baths, and Doctor Schwinn lectures on the subject of materia medica, and the application of medicine, how to give it and administer it; and some of the others have the subjects of bandaging and surgery; and then they get actual experience at the same time.

Mr. HAY. You have a two years' course there, I believe?

Doctor CLARK. Two years.

Mr. HAY. What is the usual term in schools of that kind? Three or four years, is it not? Take the Johns Hopkins, for instance.

Doctor CLARK. Johns Hopkins is the highest school. They require a four years' course there.

The CHAIRMAN. Do you give them an examination at the end of the two years, and then issue a diploma?

Doctor CLARK. We give them an examination at the end of the first year, and an examination at the end of the two years; and I might add that when we have a nurse or attendant who expresses herself as willing to take up this course she is given a mental test before she goes in to see whether she has the qualifications necessary for a

nurse. She is given a written examination before the class is organized at the beginning of the year. If she passes the examination she goes in the junior class. At the end of the year she takes an examination, and if she passes it she is advanced then to the senior class; and at the end of that year she takes another examination.

I would add that our nurses who have graduated there, quite a number of them, have taken places with nurses in the city, and have nursed cases alongside of other nurses who graduated from the city hospitals here, and some from Johns Hopkins, and they have given just as good satisfaction as the others. We have a nurse at the present time who has taken a patient to Europe, and is absent from the hospital now; and two men who have been for one or two years with a private patient as nurses. We are frequently called upon by city physicians to furnish them with nurses, and we allow them to go out to take these cases. It means \$25 a week to them—\$20 to \$25. We permit them to do it, and hold their places in the institution for them, so that they may be enabled to return when they have finished with the cases.

Mr. SMYSER. You are actuated in that by a desire to help a fellow-citizen in Washington if you can?

Doctor CLARK. Yes.

Mr. HAY. How is this training school kept up? Is it kept up by the institution?

Mr. SMYSER. Do you mean the expense?

Mr. HAY. Yes; the expense.

Doctor CLARK. There is no expense, practically, except to buy text-books, or something like that. I think they buy their own text-books.

Mr. HAY. So it does not cost anything to the Government?

Doctor CLARK. Very little.

Mr. SMYSER. You furnish the room and the lectures?

Doctor CLARK. Yes, sir.

The CHAIRMAN. Those lectures are delivered as a part of the duties of the physicians attached to the hospital?

Doctor CLARK. Yes.

The CHAIRMAN. You say you have general supervision over the clinical records. What kind of records are kept?

Doctor CLARK. Well, six or seven years ago very few clinical records were kept in the institution; but the system has been in vogue for the past few years, and we aim to make a careful physical and mental examination of all patients admitted to the hospital. It is our aim to make a mental note on each one of the cases, for a year, once a month. After that we consider the case to be what we designate as chronic. It then passes into the chronic class, and we make a mental note once every three months; and it is one of my duties to see that the physicians keep up these records, and keep them up to a certain form.

Mr. HAY. Was that inaugurated by the present superintendent?

Doctor CLARK. This system was inaugurated by Doctor White. This [indicating] is just a sample of our records. You can see the amount of matter that accumulates in one case.

The CHAIRMAN. Is that the record in one case?

Doctor CLARK. This contains the nurse's notes of the medicine administered; and the mental examination is now being dictated. Before the physician wrote it out in longhand. We do not do that

any more. We dictate it. We have extra stenographers there, and the mental examination is dictated to a stenographer, and the monthly notes are dictated. You see we have several pages of it. That enables us to get through a case more rapidly than we would if we had to longhand it and write it.

Mr. HAY. Take the case you just showed us, Doctor. Is that about the same quantity of stuff that you would have in every case?

Doctor CLARK. No; it depends on the care of the patient. If the patient receives quite a good deal of care, and receives quite a good deal of medicine, we will naturally accumulate more data. If the patient is quiet and orderly he receives very little outside of the original mental examination and a few notes.

Mr. SMYSER. May I look at that?

Doctor CLARK. Yes, sir.

The CHAIRMAN. In regard to visiting. You say it is your duty to visit every ward in the hospital once a month?

Doctor CLARK. Yes, sir.

The CHAIRMAN. And that in the month of April you visited every ward twice, as a matter of fact?

Doctor CLARK. Yes, sir.

The CHAIRMAN. In a visitation of that kind you see personally every patient, do you not?

Doctor CLARK. I see all that are in the house. Perhaps if I go in some of the chronic wards in weather like this a great many of them would be out, and I would not see them. But in the winter time I imagine I would see everybody, because they would probably be in the house. But the bedridden cases and all the sick and ill I would see.

The CHAIRMAN. Do you personally talk to these patients?

Doctor CLARK. Yes, sir. I go rather as consulting physician with the other physician. And I might add that any time during the day or a week that a physician has a person who is taken suddenly ill, in all probability he would ask me to see the case with him. If it was a case of an accident requiring surgical treatment, he would ask my advice on it, and upon my recommendation being given or upon our conclusion after an examination he would take some action in the case. Perhaps a patient is having convulsions in one side. I look such a case up very carefully, and recommend to the physician in charge of the department that he had better call one of the surgeons from the city to see him. Perhaps it is an operative case, and looks like a case of Jacksonian epilepsy. We might be able to afford him some relief.

The CHAIRMAN. In regard to calling the visiting surgeons, do you perform any operations yourself?

Doctor CLARK. Very few. I have performed some, but I do not do it any more.

The CHAIRMAN. Who performs those operations usually?

Doctor CLARK. For general surgery we call upon Major Barton, of the U. S. Army, Doctor Kerr, of the city, and Dr. Ford Thompson. For diseases of women we call upon Dr. Joseph Taber Johnson, Dr. Wesley Bovee, and Dr. I. S. Stone. For genito-urinary diseases we call upon Doctor King and one or two others whose names I do not recall. For general medicine we call upon Doctor Adams, Doctor Cook, and two other city physicians. I do not recall their names.

The CHAIRMAN. Are these surgeons and physicians compensated for the work they do there?

Doctor CLARK. No, sir.

The CHAIRMAN. They are not?

Doctor CLARK. No, sir.

The CHAIRMAN. They are men of high standing in the city, are they not?

Doctor CLARK. Yes, sir; they are the best physicians in the city.

The CHAIRMAN. They give their services, under those circumstances, without any compensation whatever?

Doctor CLARK. Yes, sir. Since the operating room has been operating we have had about 15 capital operations—since about a year ago, I think, last June.

Mr. HAY. Do I understand you to say you keep a record of that character of every case in the institution?

Doctor CLARK. You misunderstood me. It is our aim to keep that kind of a record of every case in the institution. When the matter of records was started we had hundreds of cases out there and had very little data on them; but we are going back into those cases and are trying to bring them up to date. In the female department we have been working pretty hard, and have the records pretty well up to date on every one in the house, and I also make a mental note and a physical examination.

Mr. HAY. How long has this system been in operation?

Doctor CLARK. The system of dictating has been in operation since Doctor White has been there. Doctor Richardson started the system also, but we had then a regular page to fill out. That we have done away with.

Mr. HAY. This system has been in operation since the 1st day of October, 1903?

Doctor CLARK. Yes, sir.

Mr. HAY. And of course you could not do it all the same day. You have been gradually getting these various notes on various patients?

Doctor CLARK. Yes, sir.

The CHAIRMAN. What you mean is that that is so of all patients received since October 1, 1903?

Doctor CLARK. I would not say that that is so exactly, because we receive in the institution very nearly 700 people a year. We average almost two a day, and, especially in the male department, it is pretty hard to keep it up. Then we will get 19 or 20, or sometimes a car-load of patients and we get behind. But the attempt is made to examine the young curable cases. In cases of senility, after we take them up and make a mental examination, if we do not feel hopes for them we do not keep such a careful record of them. But the young men—the curable cases—are generally written up and more carefully noted.

Mr. HAY. There was a patient here who gave evidence before the committee by the name of Miss Corbett. Could you produce her record?

Doctor CLARK. Yes, sir; I could produce her record.

Mr. HAY. I would like to see that.

Doctor CLARK. You want the record of Miss Corbett?

Mr. HAY. Yes; Cornelia Corbett.

The CHAIRMAN. You see all new patients that are admitted in the hospital, do you not?

Doctor CLARK. Yes, sir; I see all patients within a week after their admission into the hospital.

The CHAIRMAN. Who sees them before you do?

Doctor CLARK. The physician in charge that receives them first sees them.

The CHAIRMAN. No patients are transferred, are they, from ward to another without your acquiescence? Is that true?

Doctor CLARK. Yes, sir.

The CHAIRMAN. In that connection, who determines whether patients are able to perform any work for the hospital—patients in the laundry, or patients in the kitchen?

Doctor CLARK. Well, the physician in charge of the department would know naturally more about the patients. It is our aim to encourage work in all able-bodied patients, and we encourage that just as much as we can. We try to have all of them have some task to perform during the twenty-four hours.

The CHAIRMAN. Do you compel them to do it?

Doctor CLARK. No, sir; not in that sense. I have been in an institution where we compelled them to perform some task.

The CHAIRMAN. You think it is better for the patient to have something to do than to have nothing to do?

Doctor CLARK. Yes.

Mr. HAY. That is the general treatment of the insane?

Doctor CLARK. Yes; to employ them.

The CHAIRMAN. Are some patients employed on outside work, cleaning the grounds, for instance?

Doctor CLARK. We have a good many employed on out-of-door work.

The CHAIRMAN. Do you raise vegetables on the farm? Are any patients employed on that kind of work?

Doctor CLARK. Yes, we have quite a number employed on the farm, about the barn, and about the cow barn, and places like that, and on the grounds. We have there, in all, 600 people employed.

Mr. HAY. You have 600 in all?

Doctor CLARK. In all.

Mr. HAY. And that would be a percentage of about how many?

Doctor CLARK. About a third of the number.

Mr. HAY. About thirty-three per cent?

Doctor CLARK. Yes.

Mr. HAY. What is the percentage usually employed in the various other institutions with which you have been connected?

Doctor CLARK. As I say, in one institution with which I have been connected we required every patient to work who was not confined to bed, or sick, or ill. That is, they had to perform some task, if it was only to get up in the morning and make his own bed. He had to do it. If he did not he would not get any privileges, any parole.

Mr. HAY. What is your idea about that? Do you think it a good plan?

Doctor CLARK. I think it was a very good plan.

Mr. HAY. Do you think it ought to be pursued out here?

Doctor CLARK. We try to pursue that.

Mr. HAY. But I understand you to say that in this institution you speak of they were compelled to work.

Doctor CLARK. Not in the sense of being forced to do it, but we told them that in return for the privileges of the institution we wanted them to do some work.

Mr. HAY. Is that system pursued at the Government hospital?

Doctor CLARK. No, sir; it never has been pursued at the Government hospital.

Mr. HAY. Is it your judgment that it ought to be done?

Doctor CLARK. We could not do it with the class of patients at the Government hospital, I do not believe.

Mr. HAY. Why?

Doctor CLARK. For this reason, that we have out there 700 people in the Government hospital over 60 years of age. It would be, I think, utterly impossible to get very much work out of any of those people. We have about ten per cent of our people in bed. I think we have between 250 and 300 people confined to bed all the time. We have more bed-ridden patients, in proportion, than any other institution in the country, I think; and we have not a class of patients that we can put to work.

Mr. HAY. I suppose some of those patients—the great majority of them—are old soldiers and sailors?

Doctor CLARK. A great many of them. We have a great many old soldiers, and they can do very little work.

The CHAIRMAN. Doctor, what is your practice in connection with the accumulation of patients for observation? How do you do that? How do you separate them?

Doctor CLARK. That we have not started yet. That is a privilege the superintendent has given me. That is for the purpose of studying a certain class of disease. Suppose we want to take up the study of paresis. I have the privilege of accumulating all the paretics—20 or 25 paretics—in one ward, where we can go if we want to see the paretics, and study it and thereby learn what we can about the case. If they are scattered all over the institution in the various wards, it would be an immense amount of labor to go and see them.

Mr. SMYER. That is done to economize time in the observation?

Doctor CLARK. Yes. The object is to get them as close together as we can, so that it can be observed better than if the individuals were scattered around the place. We have not started that as yet.

The CHAIRMAN. Have you facilities in the buildings connected with the hospital now to do that?

Doctor CLARK. Yes.

The CHAIRMAN. That will be a feasible thing to do when you get the opportunity?

Doctor CLARK. Yes. I have recently made a study of one class of cases, and have worked up about all of the data to be gotten there. It is a peculiar form of mental trouble in connection with alcoholism, called Korsakow's disease. We have had seven or eight cases, and they will be reported to the medical journals.

The CHAIRMAN. Cases of alcoholism are usually acute, are they not, and almost always curable?

Doctor CLARK. That is true of some forms; but alcohol is responsible for a great many forms. Acute alcoholic hallucinosis is a favorable form, and delirium tremens is a favorable form; but

chronic alcoholic dementia, for instance, is unfavorable, as also is Korsakow's disease. Korsakow's disease is a disease that is named after Korsakow, the man who discovered it. In connection with it we have multiple neuritis. The man is not only physically ill, but has mental disability as well.

The CHAIRMAN. Is that caused by the excessive use of alcohol?

Doctor CLARK. Yes; it develops in chronic alcoholics.

Mr. SMYER. You say that is not so favorable as some?

Doctor CLARK. No; it is unfavorable.

The CHAIRMAN. Part of your duties are to keep yourself thoroughly posted and familiar with the literature on the subject of mental diseases?

Doctor CLARK. Yes, sir.

The CHAIRMAN. You do that, presumably, for the sake of being better able to treat patients under your care, do you not?

Doctor CLARK. Yes, sir. It is any physician's duty to keep himself posted.

The CHAIRMAN. I desire to know more about your own profession. I do not mean that that is the only reason, but that is a reason why that should be made a part of the duties of a man at the head of the clinical department.

Doctor CLARK. The object is, that if I read an article upon a certain line of treatment for a certain form of mental trouble, if we think there is any merit in it, we can institute that treatment at the hospital.

Mr. SMYER. Did you see that article in the Post to the effect that insanity grows in frequency during the strawberry season?

Doctor CLARK. I did not notice that.

Mr. SMYER. It was in some Washington paper that I read it, and I concluded to cut out strawberries.

Mr. HAY. You must be very much afraid of going to St. Elizabeth's. [Laughter.]

Doctor CLARK. We receive all the principal medical journals published in this country and a great many from Europe; and the Superintendent, Doctor White, reviews the French and German literature and makes abstracts upon anything in our line. Then each physician in his department has certain journals to review and abstract, especially upon neurology and nervous diseases.

The CHAIRMAN. There is one question I would like to ask. Is the science of the treatment of the insane more advanced in this country than it is in others, or are we behind?

Doctor CLARK. I do not think it is more advanced, and I do not think we are very much behind. I think our patients in this country are better housed and cared for than in some of the European hospitals.

The CHAIRMAN. Have you visited the European hospitals yourself?

Doctor CLARK. No, sir; I have not.

The CHAIRMAN. You only know from what you read?

Doctor CLARK. I think we spend more money per capita, and have more employees per capita, than they have in the old hospitals in Europe.

The CHAIRMAN. There have been a good many here who have testified that with more attendants better results could be obtained. What is your opinion? You have, as I understand, approximately 700 attendants?

Doctor CLARK. We have approximately 700 employees.

Mr. HAY. 300 attendants.

The CHAIRMAN. You have between 2,500 and 2,700 patients?

Doctor CLARK. 2,550, in round numbers.

The CHAIRMAN. Do you think you have a sufficient number of employees? Take the question of attendants first.

Doctor CLARK. As to the question of attendants, the only way to get at that properly, I think, is to compare this institution with other institutions; and if you will permit me I will read you a few statistics on that line.

The CHAIRMAN. I think that would be an excellent thing to do.

Doctor CLARK. There is the Massillon State Hospital, Massillon, Ohio. I was connected with it for 18 months.

Mr. HAY. Do you read from the last report?

Doctor CLARK. No, sir. This is not from a report. This is from a personal letter from the Superintendent there which I received a few days ago, as to the number of people he had there at that time.

Mr. HAY. That is Doctor Eymann?

Doctor CLARK. Yes, sir. They have 757 men patients and 693 women patients, making a total of 1,450. They have 62 day attendants and 18 night attendants, total, 80. In the woman's department of St. Elizabeth alone we have 83 employees, who have the care of 646 women. This is 3 more employees than they have in the Massillon State Hospital, with its 1,450 patients.

Mr. HAY. Are all those 83 employed in the care of the insane?

Doctor CLARK. They are employed in the care of the insane right in the wards, virtually. We include in that number about 12 domestics.

Mr. HAY. Chambermaids?

Doctor CLARK. No; they are not chambermaids. They are domestics. I will explain that a little bit later. It is a system of help we use that they do not use in any of the other hospitals. The ratio of attendants to patients in the Massillon State Hospital is 1 to 18. At St. Elizabeth's it is 1 to 8 and a fraction.

At the Columbus State Hospital, Columbus, Ohio, they have 860 men and 729 women patients, a total of 1,589. They have 52 male attendants and 63 female attendants, total, 115. This is a ratio of 1 to 14. In the receiving department at St. Elizabeth we have 449 patients and 73 employees. This is 21 more employees than in the men's department of the Columbus State Hospital, and they have 411 more patients than we have. They have 860 men, and we have 449. St. Elizabeth's has 21 more employees.

The CHAIRMAN. St. Elizabeth's has 21 more employees?

Doctor CLARK. Yes. St. Elizabeth has 73 and they have 52. As to the other hospitals that I have looked up, it is a pretty hard matter to get the ratio of attendants to patients, but I have been able to get some information.

In the Manhattan State Hospital, Ward's Island, New York City, the number of patients is 4,355, which is 1,791 more, or, in round numbers, 1,800 more patients than we have at St. Elizabeth. They have 712 employees, which is about 12 more than we have at the Government hospital, in round numbers. We have, in round numbers, 700.

The CHAIRMAN. You say they have 4,500 patients?

Doctor CLARK. 4,355, or 1,800 more than we have, and they have only 12 more employees.

In the King's Park State Hospital, Kings Park, Long Island, they have 2,894 patients, which is 330 more than at St. Elizabeth. They have 514 employees, which is 186 less than at St. Elizabeth, and they have more patients.

At the Central Islip State Hospital, Central Islip, N. Y., they have 3,650 patients, which is 1,086 more than at St. Elizabeth. They have 486 employees, which is 214 less than at St. Elizabeth.

Long Island State Hospital, Brooklyn, N. Y., and Binghamton, State Hospital, Binghamton, N. Y., have respectively 1,197 and 1,415 patients, or a total of 2,612. They have 223 and 293 employees, respectively, or a total of 516. They have, taken together, 48 more patients than we have at St. Elizabeth, and they have 184 less employees. The ratio of employees at the Government Hospital for the Insane figures about 1 to 3 and a fraction— $3\frac{6}{10}$, I think. This is the lowest ratio of any institution in the United States that I have looked up.

Mr. HAY. While those comparisons show that you have more attendants, the question is whether in your opinion the treatment and care of the insane will be improved if you have more attendants at St. Elizabeth.

Doctor CLARK. Under the present system, with the present arrangement we have there, I do not see the necessity for any more employees.

The CHAIRMAN. Attendants have testified that they are on duty from 6 o'clock in the morning until 5 in the evening one day, and from 6 o'clock in the morning until 8 in the evening the next day—eleven hours one day and fourteen hours the next day.

Doctor CLARK. Those are their hours when on duty. They should have added also that during the week they get one half-day. There is one day in the week when they only work six hours.

The CHAIRMAN. That is, one day out of seven they work six hours.

Doctor CLARK. Yes, they only work six hours. If you take forty-two days, or six weeks, which is an even number of days, they get two Sundays in that time, which will leave forty days that they work. Six of those days they only work six hours, which leaves thirty-four days. Half of 34 is 17. Seventeen days they work fourteen hours, and about seventeen days they work on an average of eleven hours, and then the sixth day they work six hours. If you figure it up you will see that they work on an average of about eleven hours a day—that is, without including vacations. They get annual vacations, and also every third holiday, and fifteen days' vacation.

The CHAIRMAN. With pay?

Doctor CLARK. With pay; yes, sir.

Mr. HAY. As to the fifteen days that they get with pay, suppose they are ill and can not come; is that included in that fifteen days, or not?

Doctor CLARK. No, sir; that goes to their credit, which is taken up at the end of the year.

Mr. HAY. So that if they are sick and can not attend, that is credited against their fifteen days' leave, is it?

Doctor CLARK. They use up their vacation first, and after that it goes in as sick time.

Mr. HAY. If they are sick fifteen days, they do not get the fifteen days' annual leave?

Doctor CLARK. I have never known an employee out there to miss the annual leave on account of sickness, in my department.

Mr. HAY. I do not mean that they are sick at the time when the annual leave comes around. The point I am getting at is, if they are sick for fifteen days would they then get fifteen days besides?

Doctor CLARK. Yes, sir; I think they would.

Mr. HAY. They would?

Doctor CLARK. I think they would. I would not say so positively, but that is my opinion about it.

Mr. HAY. Do you know whether the employees in these other institutions have holidays, and the time and vacation that the employees have out at this institution?

Doctor CLARK. Well, at some institutions they do not get as much time as they get out here. The hospitals in Ohio did not give quite as much when I was there.

Mr. HAY. When these people are having their leave, and when they take their Sundays off, and so on, they are not in attendance upon the insane, of course. How many do you suppose are having their leave at the same time, and how are their places supplied?

Doctor CLARK. The vacations are scattered through the whole summer season. We rather cater to the desires of the nurse. If she wants to go a certain month or time, if we can arrange it for her so that she can go, we arrange it.

Mr. HAY. You have 300 there?

Doctor CLARK. Yes, sir.

Mr. HAY. How many would be off at a time?

Doctor CLARK. We probably excuse four or five at a time. Of course, I am talking of the women's department. I am not so thoroughly acquainted with the men's department.

Mr. HAY. You excuse four or five at a time?

Doctor CLARK. We excuse four or five at a time, and as soon as they get back we excuse four or five more.

Mr. HAY. How do you supply their places?

Doctor CLARK. Their places are not supplied at all. The pay roll is not increased by additional help during that vacation season.

Mr. HAY. So, as a matter of fact, these 300 attendants are not all the time at the institution?

Doctor CLARK. No, sir.

Mr. HAY. Or at any one time at the institution?

Doctor CLARK. Of course, they are taking their vacations.

Mr. HAY. And when they get their half day off?

Doctor CLARK. Yes.

Mr. HAY. Is there anybody to supply their places?

Doctor CLARK. No, sir. It is just the same as with the assistant physician. If he gets any time off the other has to do his work during that time.

Mr. HAY. I understand. I just wanted to get that out. Doctor, you are on that civil-service board out there?

Doctor CLARK. Yes, sir. I am chairman of the civil-service board. That is, the local board there.

Mr. HAY. You are selected by the Civil Service Commission, are you not?

Doctor CLARK. Yes, sir; I was appointed.

Mr. HAY. On the recommendation of the superintendent?

Doctor CLARK. Yes, sir.

Mr. HAY. So that the superintendent recommends the people who are on the civil-service board of the institution?

Doctor CLARK. Yes, sir; I believe that is the way it is done. Doctor Richardson appointed me. I have an idea he recommended me.

Mr. HAY. I am told by a gentleman at the Civil Service Commission that that is the way it is done.

Doctor CLARK. I remember I received a notification that I was made chairman of the board. I do not know how they got my name.

Mr. HAY. I am told by an employee at the Civil Service Commission that that is the way it is done—that Doctor White recommends it. So, as a matter of fact, the authorities of the institution control the civil-service examination?

Doctor CLARK. Yes, sir; under their rules and regulations.

Mr. HAY. Under the rules and regulations of the general Civil Service Commission?

Doctor CLARK. Yes, sir.

Mr. HAY. If the board of which you are chairman were to recommend an examination for any employee, nurse, attendant, or anybody else, do you not think the general Civil Service Commission would accept whatever you chose to recommend?

Doctor CLARK. Well, I don't know whether they would or not.

Mr. HAY. If you recommended that these attendants should be given an examination which was more strict, and which would tend more to show what their experience is, and what their qualifications are for the employment—

Doctor CLARK. They might adopt the suggestion; yes, sir.

Mr. HAY. Do you not think they would?

Doctor CLARK. They probably might do that.

Mr. HAY. Have you ever made any such suggestions?

Doctor CLARK. No. We did try once to hold an examination of our own, and they did not like it very much.

Mr. HAY. How do you mean you tried to hold an examination of your own?

Doctor CLARK. That was in the matter of appointing internes under Doctor Godding, I think, and under Doctor Richardson first. The internes were not given competitive examinations, but were selected from the hospitals in the city. Doctor Richardson thought probably it would be fairer to make it a competitive examination, and give the graduating classes at Georgetown and George Washington colleges a chance to compete for it, and select the best men. We went to work and made the examinations. The Civil Service Commission found out that we gave that examination, and criticised us very severely for doing it. Since that time they have held it.

Mr. HAY. So that they really carried out your suggestion?

Doctor CLARK. They put it under the Civil Service Commission. They simply covered that office in.

Mr. HAY. The question I ask is whether you or Doctor White have ever recommended to the general Civil Service Commission to hold a more rigid examination for the nurses and attendants?

Mr. SMYSER. And more comprehensive.

Mr. HAY. And more comprehensive examination?

Doctor CLARK. I have never taken that matter up, but have had it under advisement for some time.

Mr. HAY. Do you think you can suggest an examination which would tend to give you employees who would be more competent than those you have been receiving?

Doctor CLARK. Well, I don't know whether we could get more competent people or not. I don't know whether we would get any more competent people or not. I would not like to say about that.

Mr. HAY. If you do not know whether you would get any more competent people, why have the examination?

Doctor CLARK. The rule we have there seems to have worked fairly well so far.

Mr. HAY. But I understand you say you have under advisement—

Doctor CLARK. We have under consideration whether we would make a mental test. If the physician asks for an attendant, and he makes his application to the Civil Service Commission, the secretary furnishes three names, and he selects one of them. That man is ordered to that position, and when he reports for duty the physician has an opportunity of making a test. He can examine the applicant mentally, and turn him down, or do what he pleases. If he does not consider him favorably he can turn him down.

Mr. HAY. He can turn all three down if he desires?

Doctor CLARK. He can turn all three down, and call for the next three, if they do not suit him.

Mr. HAY. I do not know that you do it at St. Elizabeth's—I would not say that—but in some departments, when they want to reach a man away low down on the list, they sometimes keep on turning down the three until they get the man they are after.

Doctor CLARK. I do not know about that. We never had enough applicants on hand to do that. We just take them as they come.

The CHAIRMAN. When you turn those three down, are they stricken from the eligible list?

Doctor CLARK. No, sir; that makes one certification. They are certified three times. If they are certified three times, and are not selected, their names are taken off the list, and they have to make a new application to get on the list again.

The CHAIRMAN. That is not a specific rule of your hospital, but a general rule of the Civil Service Commission?

Doctor CLARK. Yes, sir. As I say, I do not know of any man going beyond the three. They generally take the highest one on our rating out there. We have a scarcity of applications generally, especially in the summer season, at this time. Young men have vacations in their minds; but toward winter we have more applications.

The CHAIRMAN. Where do the attendants usually come from—the country?

Doctor CLARK. Yes, sir; a good many come from Maryland and Virginia, and differet places around—that neighborhood.

Mr. SMYSER. You have not had any Ohio attendant out there that has been knocking patients around, have you? I want to make a good name for Ohio, you see.

Doctor CLARK. Not that I recall.

Mr. SMYSER. Can I ask you to let me have the record of Mrs. Griffin? I see that she was admitted there on the 14th of April, 1904. I find this first paper signed by Doctor Thompson, and another on the 18th of April. Do you know whose handwriting this is?

Doctor CLARK. Yes, sir.

Mr. SMYSER. Whose?

Doctor CLARK. Dr. Paul L. Freeman's. He is a physician in the Regular Army, at present in the Philippines.

Mr. SMYSER. In view of some testimony we have had here, I want you to read this physician's examination. He writes worse than a lawyer, and that is the reason I ask you to read it.

Mr. HAY. Who is the patient?

Mr. SMYSER. Mrs. Griffin.

Mr. HAY. Did she testify?

Mr. SMYSER. Her daughter came and testified.

Doctor CLARK. This patient was admitted to the Government Hospital on April 14, 1904. Her name is Cecilia J. Griffin. At the time of her admission she was a very disturbed woman, very much agitated, and an examination was not made of her case until about the 18th. I examined her and also had Doctor Freeman examine her. He was my assistant at the time.

Mr. SMYSER. Did you make an examination yourself?

Doctor CLARK. Yes, sir. Doctor Freeman wrote up the examination. Do you want me to read the mental and the physical examination?

The CHAIRMAN. Yes.

Doctor CLARK. As the judge says, he is a pretty poor writer. It reads:

April 18, 1904. There is considerable clouding of consciousness. Apprehension is dulled and comprehends very little of her surroundings. Comprehends nearly all that is said to her. Memory for past events is very poor. For present events is very poor, principally on account of impressibility. Has delusions and probably hallucinations of hearing. Has been accused of murdering some one and some other people have been indicted with her, and is fearful for them also.

The whole extent of thought seems to be made up of these self accusations and delusions of a fearful character, which are very ill-defined and expressed incoherently. Stated at one time that she has committed murder and has been accused of it by others and the next minute accuses herself of it. Coupled with this is an irritable condition and motor excitability. Rubs her face and even strikes herself. Alternately takes her hair down and puts it up. Runs about the room, jumps up and down, etc. Her attention can not be held for any length of time, but long enough to give a short answer to questions. Is oriented partly for persons, time and place, but is generally confused and it is only by making her think and holding her attention that she will answer questions at all. Is restless at night. Habits are tidy. Is indifferent as to place and takes no interest in anything about her.

Physical examination.—Lungs. Right-side inspection: There is flatness of the chest wall over infraclavicular and inframammary regions. On palpation a crepitation can be felt over the second, third, and fourth ribs or costal cartilages at their junction with the sternum, which occurs at the beginning and during inspiration and at the end of expiration. This resembles the crepitus of a fractured rib. By pressure over the cartilages in the area crepitus is also elicited. Percussion denotes a uniform hyperresonance over this area, which is not tympanic. On percussion the crepitus is also elicited. Auscultation: Coarse bubbling râles and cavernous breathing heard over a considerable area anteriorly.

Left side: Inspection reveals flattening similar to right side, and a little more marked. On percussion, over the upper lobe anteriorly, is very hyper-resonant, and more so than left side. Over apex of this lung are heard coarse mucous râles, and lower is heard cavernous breathing. On palpation over right lung anteriorly about the junction of third and fourth cartilages with sternum a distinct impulse is felt at the beginning of inspiration.

Mr. SMYSER. You talk about crepitus. Would that indicate a fracture?

Doctor CLARK. I examined her——

Mr. SMYSER. Did you participate in the examination?

Doctor CLARK. I examined her and said nothing about it to my assistant, and told him to look the patient over and tell me what he found. He examined her. She was sent in as being tuberculous, and so we made a very careful examination of the lungs. He came back to me and said, "Doctor, that woman's ribs are fractured." He says, "I find her ribs are fractured on the right side near the sternum." I told him that was what I found.

Mr. SMYSER. I want to ask you right now, in your examination did you find a fractured rib?

Doctor CLARK. Yes.

Mr. SMYSER. You say that examination was not later than the 18th?

Doctor CLARK. No, sir; about the 18th.

Mr. SMYSER. Do you say that that summary of both her mental and physical condition is a fair summary of what your examination developed at that time?

Doctor CLARK. Yes, sir.

Mr. SMYSER. I wish you would turn to the next page there—that first typewritten page.

Mr. HAY. Do you mean to say that this patient was in the hospital for four days before you found she had had a rib fractured?

Doctor CLARK. Yes, sir; before we noticed it. I prefaced my remarks by saying that she was a very disturbed and very much agitated woman, walking the floor, wringing her hands, thinking people were murdering her, and she had murdered somebody; and she was in such an agitated state of mind that we could not make a physical examination.

We never suspected that there was anything wrong with her in that way. We never had reason to suspect it. While she was there during those four days she had not received an injury to our knowledge, and outside of being disturbed she was in fairly good physical condition apparently. As soon as I made this physical examination and discovered that, I sent for her son. He came over and I told him, "In an examination of your mother we find that she has one or two ribs fractured—I do not know just how many—and I am sure I do not know whether that fracture occurred in this hospital or before she came in here. To the best of my knowledge she has not received an injury since she has been here, and nobody has injured her, and I am of the opinion that it occurred before she came here."

He told me, "Doctor, it is my opinion that my mother's ribs were fractured before she came over here, before she was brought to you." He says, "I know she fell over a stand at home and struck her side." We never expected to hear tell of this case again. I do not remember seeing the evidence of a bruise there. If there had been sufficient

force there to cause the fracture of a rib there would have been some external evidence of it. Her own daughter testified as to how her mother struck herself upon the chest, and walked the floor. There was considerable irritation there. I don't know what the examining physician would say, but if they go on record and say the woman had tuberculosis and all that sort of thing, and that she did not have a fractured rib, I think it can be contradicted. We have made repeated examinations and she has not got tuberculosis. She has been in the institution two years.

The CHAIRMAN. And is there now?

Doctor CLARK. Yes; and is about as well to-day as when she was admitted, considering the fact that she is two years older. She was 66 when she came in and is 68 now. She has been a constantly agitated patient from that time to this, and I have never had a patient in my life that has given more trouble than this patient. Her daughters have visited the institution every day since she has been there. They never miss a day. They come in the afternoon and stay at night; they stay until midnight, and in fact do about as they please. The woman at the present time is never left alone.

Mr. SMYSER. When this lady was brought there you had no reason to suspect a fracture?

Doctor CLARK. No, sir.

Mr. SMYSER. Doctor, from what the physician had said on whose affidavit she was committed or from anything any friend said or anything she said, she being in the condition of mind she was in, you could not and did not make the examination at once?

Doctor CLARK. No, sir. That is it exactly.

Mr. SMYSER. Is that unusual?

Doctor CLARK. No, sir; frequently we have to wait a week before we can make a careful examination of the lungs and heart.

Mr. SMYSER. Can you say that you made this examination as soon after her admission to the hospital as you could, under the circumstances?

Doctor CLARK. Yes, sir; I told her at the first quiet period that she had to be examined.

Mr. SMYSER. And that disclosed the examination you have read?

Doctor CLARK. That is it exactly.

Mr. SMYSER. I wish you would, in this connection, read the first part of this typewritten matter.

Doctor CLARK. I am very sorry indeed that I did not succeed in examining her the first day, but such is the case. As soon as I found her condition I went immediately to the superintendent's office and reported the matter to him in full, and we sent for the son to come over, and explained the matter to him thoroughly. I think, if you want him to testify, and he tells you what he told me last Sunday, he will testify how that fracture occurred, as he believes. The record in the case, under date of May 16, 1904, contains the following:

There has been no improvement in the patient's physical condition since her admission. She has a cough with expectoration (see analysis of sputum). There was a moderate swelling, with some induration of the left parotid gland, which rapidly subsided under treatment. Rests very poorly at night, and hypnotics are administered each night. The fracture of the ribs that was discovered shortly after admission has been treated by strapping the side with adhesive strips. This affords her much relief and she is free from pain to a great extent. Mentally there has been no change in her condition; she is

extremely disturbed most of the time during the day and night; her delusions are of a subjective character and of a very painful nature. She frequently expresses herself that she is on fire, and that she is burning up, etc. Her appetite is fairly good; bowels regular, and habits tidy.

Mr. SMYSER. When were the adhesive straps put on?

Doctor CLARK. They were put on immediately after we discovered that fracture.

Mr. SMYSER. Did you participate in putting them on?

Doctor CLARK. Yes, sir.

Mr. SMYSER. I mean to ask whether that is the ordinary course of treatment in such cases?

Doctor CLARK. That is the usual line of treatment. We undertake to strap the sides and throw the greater part of the work on the other lung, so that it will not expand at each expiration and inspiration, which causes a certain amount of pain.

Mr. SMYSER. Is that the recognized treatment for a fractured rib?

Doctor CLARK. Yes, sir; that and rest in bed. We have them lie down, and then strap the side with adhesive straps.

Mr. SMYSER. Was there any attempt on your part, or on the part of any physician there, to conceal the condition of this patient?

Doctor CLARK. No, indeed. I never concealed the condition of any patient at all. I was only too anxious to communicate with them. I did not even take the time to write a letter about this case, so that I could get him there the same day. If I had written a letter it would have taken the next day before he could have come. I communicated with him by telephone. I am sorry I did not write a letter, because you would have had it in evidence. I got him over there the same day. We were all surprised at this accident. The nurses were surprised because, to their knowledge, she had not fallen.

Mr. HAY. Miss Griffin testified that she could not see her for three weeks after she was put in the hospital. How was that?

Doctor CLARK. She did not see her for three weeks. She might have seen her if she had insisted upon it. Her presence could not do the woman any good, and we recommended that she stay away from the hospital.

Mr. SMYSER. That was the reason she did not see her?

Doctor CLARK. Yes, sir.

The CHAIRMAN. This patient seemed to have had a bad fall in the hospital since that time.

Doctor CLARK. Yes; she has also had a fracture since then.

Mr. SMYSER. You will find that in the typewritten matter.

The CHAIRMAN. I wish you would read that.

Doctor CLARK (reads):

January 18, 1906. On the morning of the 17th of January, at 5.30, the patient was permitted to leave her room by the nurse. After waking up she became quite restless, and the nurse dressed her and permitted her to walk in the main dormitory, which has been a custom for some time. The patient generally becomes quiet when she has more liberty. On this particular morning she followed the nurse into the dormitory and stood for a few minutes at the radiator, and then turned to return to her rooms; in doing so she fell and received a fracture of the right femur near the hip joint. She was placed in bed. The visiting surgeon, J. Ford Thompson, saw the case in consultation with Doctor Hough and recommended that she simply be kept in bed without the application of any dressing.

That is an account of the second fracture. I may say that I was not in the institution when that occurred. I was in Ohio at the time, and

it occurred during my absence. It was an accident, pure and simple. This woman was very disturbed. She would sometimes get her sleep and awaken at 5 o'clock in the morning, and when she was awake she would get noisy and nervous. The nurses had instructions from me and the doctors to let her get up and to circulate around. She did that on this morning. The nurse walked out ahead of her to look after some other patient, and she walked over and leaned on the radiator. In turning around she fell, and being an old lady she struck the side of her hip and fractured it. It was an accident, pure and simple. I do not think any person could be held responsible for such an accident.

MR. HAY. Are those floors slippery?

DOCTOR CLARK. The floors are polished floors. They are kept absolutely clean by polishing, rubbing, and scrubbing.

MR. SMYER. Not only with respect to the case of Mrs. Griffin, but in regard to the any other case, do you know of any such practice there as the attempt to conceal the actual condition of a patient from friends?

DOCTOR CLARK. It has never been my custom to do such a thing as that. I am only too glad to communicate with their friends as soon as I can when such accidents occur, and to have them come over there and investigate themselves, if they desire to do so.

THE CHAIRMAN. Her friends were notified of this accident when her femur was broken?

DOCTOR CLARK. Yes, sir; I think we spent a whole day trying to locate those girls. They did not know where they lived at the time, but they finally found them, and she saw them the same day. They came over that evening.

THE CHAIRMAN. You stated that it was always the desire of the authorities at St. Elizabeth's, when it was possible, to send a patient to the State hospital; in other words, that when you found the District of Columbia was taking care of some one a State ought to take care of you had in several instances sent them away as quickly as possible. Is that true?

DOCTOR CLARK. Yes, sir.

THE CHAIRMAN. Was that ever done in cases where soldiers lived in any particular State? Was there ever any desire on your part to get the old soldiers into another institution if you found they could be properly cared for in a State institution?

DOCTOR CLARK. No; the soldiers are a different class. They come under a different heading entirely. This institution was originally built for soldiers, and is now a soldiers' home for the insane soldiers. The District people who are there are simply boarded there. The Government permits them to send their insane there.

THE CHAIRMAN. So that old soldiers, no matter from what State they come, properly belong there?

DOCTOR CLARK. Yes.

THE CHAIRMAN. And you do not make any effort to get rid of them?

DOCTOR CLARK. No, sir; we get them from the home at Dayton, Ohio, and the Hampton Home, and the National military homes throughout the country. Those patients that are returned to the States are really wards of the District of Columbia, and the longer they are cared for in the institution the more expense they are to the

District. They are charged up to the account of the District of Columbia, or Washington.

The CHAIRMAN. So far as you know, were there ever any applications made on the part of the friends of old soldiers to get them away from the home and put them in private institutions or other establishments?

Doctor CLARK. Not to my knowledge.

Mr. HAY. You were in charge of the female department until the 1st of April?

Doctor CLARK. Yes; I am nominally in charge at the present time.

Mr. HAY. How many wards are there in that department?

Doctor CLARK. I think there are about 23 wards in that department.

Mr. HAY. How many people are employed in each ward?

Doctor CLARK. I can not trust my memory for that. I have that here. In C building we have 106 patients in four wards. We have thirteen nurses and two domestics, and two bath attendants in that ward. That would be seventeen employed in that one building.

Mr. BARCHFELD. How many patients have you there?

Doctor CLARK. We have about 100 patients. We have a system of domestics in these new departments entirely. The work in the dining room is done by domestics. That work has been entirely taken off the hands of the nurses. They have nothing to do with it. These domestics prepare the food for the tables, set the table, and when the meal is ready they call the patients by ringing a bell. They go to the dining room to eat and as soon as they have finished their meal they return to the sitting room, under the care of the nurse. Then the work of washing the dishes and straightening up this room is done by the domestic. The nurse has nothing to do with it. In this C building we have two domestics in the dining room.

Mr. HAY. In the C building there are how many wards?

Doctor CLARK. Four wards.

Mr. HAY. Seventeen attendants in four wards?

Doctor CLARK. Yes, sir. In C building, in the first ward, where we had to keep the worst patients, we had three day attendants and two night attendants, making five. The capacity of the ward is 26, but we never keep more than 20 in there. We always keep vacancies for emergencies. In the other ward we have two day attendants and one night attendant, which is three, for about the same number of patients. Upstairs we have three for the same number. In that building we have two bath attendants to give the treatments. The nurses are not required to give treatments; they send the patients to the bathroom and the treatments are given by the bath attendants.

In epileptic cottage we have about 44 patients, and we have the same system there. We have two attendants, one domestic, and one night nurse. That would be four to 44 patients.

In convalescent cottage we have two day and one night attendants, with a domestic, making four for 35 patients.

There is about the same proportion through almost all the wards, except in the ward for feeble old women, of the bedridden class of patients. We have 26 patients there and we have four day attendants, two night attendants with a domestic, which is seven for 44 patients.

In the male receiving ward—the first ward—we have three male

attendants and two women during the day and two at night, making seven in all for only 26 patients.

Mr. HAY. They are all acute cases?

Doctor CLARK. Yes, sir; there are 7 attendants there for about 26 patients. We generally have about one vacancy in that ward. In the receiving hospital ward there are 22 men employed in connection with that building, for 100 patients.

Mr. HAY. Will you file that paper showing how many attendants and how many patients there are there in each of those wards?

Doctor CLARK. Yes, sir.

The paper referred to is as follows:

Women's department.—C building: 106 patients, 4 wards, 13 nurses, 2 domestics. L building: 34 patients, 3 nurses, 1 domestic. J building: 60 patients, 4 nurses. K building: 43 patients, 3 nurses, 1 domestic. C lodge: 38 patients, 3 nurses. M building: 38 patients, 4 nurses. Oaks A: 26 patients, 4 nurses. Oaks B: 80 patients, 5 nurses. Oaks D: 10 patients, 2 nurses. Oaks E: 11 patients, 2 nurses. Toner building: 79 patients, 3 wards, 11 nurses. Q building: 140 patients, 4 wards, 12 nurses. Total, 646 patients, 66 nurses. Supervisors, 2; chief nurse, 1; bath nurse, 2; domestics, 12; total, 83.

Howard Hall department.—Howard Hall: 136 patients, 8 wards, 19 attendants. East Lodge: 39 patients, 5 attendants. West Lodge: 100 patients, 3 wards, 8 attendants. Annex Building: 70 patients, 2 wards, 5 attendants. Dix: 3: 9 patients, 2 wards, 2 attendants. Total, 354 patients, 39 attendants. Supervisors, 2; dining-room men, 4; total, 45.

Richardson group.—R building: 144 patients, 18 attendants, 4 wards, 1 head nurse, 2 domestics. I building: 62 patients, 3½ attendants, 1 domestic. N building: 41 patients, 3½ attendants, 1 domestic. P building: 124 patients, 10 attendants, 2 domestics. Total, 371 patients, 35 attendants, 6 domestics. Supervisor, 1; head nurse, 1; domestics, 6; total, 43 employees.

Detached buildings.—Allison B: 20 patients, 2 wards, 5 attendants. Allison C: 20 patients, 2 wards, 4 attendants. Allison D¹: 28 patients, 5 attendants. Allison D²: 43 patients, 8 attendants. Atkins Hall: 50 patients, 3 attendants. Relief building: 301 patients, 7 wards, 16 attendants. Home: 195 patients, 4 wards, 10 attendants. Godding C: 7 patients. Total, 664 patients, 51 attendants. Supervisors, 3; special, 2; total, 56 attendants.

Receiving department.—B Building: 101 patients, 4 wards, 21 attendants, 1 head nurse. West Side: 346 patients, 14 wards, 43 attendants. Total, 447 patients, 64 attendants. Head nurse, 1; supervisors, 3; bath attendants, 2; barber, 1; domestics, 3; total, 74 employees.

	Patients.	Employees.
Receiving department.....	447	74
Women's department.....	646	83
Detached buildings.....	664	56
Richardson, G.....	371	43
Howard, H., department.....	354	45
Total	2,550	301

Two thousand five hundred and sixty-four patients divided by 301 equals 8 +; 2,564 patients divided by 700 equals 3.6 +.

Doctor CLARK. This statement was made several days ago and it may vary from day to day, but it is fairly accurate.

Mr. SMYSER. It is a fair summary?

Doctor CLARK. Yes, sir; it is fairly accurate.

Mr. HAY. That includes all in the whole hospital?

Doctor CLARK. Yes, sir; in the whole hospital.

The CHAIRMAN. It is the record of patients and attendants on the 14th or 15th of May?

Doctor CLARK. I do not know about that. This is not a record for any particular day. I just made up these statistics at my leisure and some of the figures may not be accurate; but these totals are fairly accurate. One day we had 2,550 patients and this day it made 2,564, so that it varies a little; but it is fairly accurate.

The CHAIRMAN. Were there any complaints made to you in regard to unnecessarily harsh treatment of patients by attendants?

Doctor CLARK. I have investigated all complaints of that character that have come to my knowledge. I have had cases of complaints several times. The investigations are always made promptly either by me or by the supervisors or by both, and some action taken in the matter.

The CHAIRMAN. How recently have you made one of those investigations?

Doctor CLARK. It has been sometime ago. Several months ago, I should say.

The CHAIRMAN. Do you know of a specific instance, of a recent occasion?

Doctor CLARK. I recall one case where a patient accused an attendant of mistreating her.

The CHAIRMAN. That was a case of a woman?

Doctor CLARK. Yes.

The CHAIRMAN. Do you know what the name of the patient was?

Doctor CLARK. The name of the patient was Mrs. Peck.

The CHAIRMAN. What did she accuse the attendant of?

Doctor CLARK. She is a very disturbed patient, and she complained that the attendant threw her on the floor and choked her. I investigated the matter. The girl on duty there had been there but a short time, and this was the second complaint I had had. I think some of the friends of the patients complained that she was not very respectful to them when they visited there. I cautioned her that she must be respectful to the friends of patients when they visited her cottage, and made a mental note of the fact. When this patient complained of mistreatment I investigated it and found that there was some foundation for her complaint; that she did throw her on the floor. Just how badly she was mistreated I do not know; the girl was discharged for it.

The CHAIRMAN. The nurse was discharged?

Doctor CLARK. Yes, sir.

The CHAIRMAN. Can you think of any other cases?

Doctor CLARK. Some time ago I discharged a nurse for slapping an old lady. The nurse was, at the time, really ill and should have been in bed. She was suffering from rheumatism and her feet and ankles were quite swollen. This old lady tramped on her feet when she was trying to dress her and she became so irritated that she struck her. That matter was reported to me by the patient. I asked the nurse if she struck this old lady and she admitted that she did slap her to get her off her foot. I told her that we could not permit any such thing as that and she would have to resign. She asked me if she could appeal to the superintendent and I told her she could. She went to the superintendent, broke down, and cried a good deal, but the superintendent said he could not overlook it and she would have to go.

The CHAIRMAN. Do you know anything about ill-treatment of male patients by male attendants?

Doctor CLARK. No; I don't know anything about the male attendants.

The CHAIRMAN. Before you were in your present position you had nothing to do with the men's side?

Doctor CLARK. No, sir.

The CHAIRMAN. Do you know anything about the food that is given to the patients?

Doctor CLARK. The food supply of the hospital is quite a broad subject to cover. I think the only proper way to cover that would be to submit the regular bill of fare in the hospital, which is followed with a great deal of regularity.

Mr. SMYER. Have you prepared that?

Doctor CLARK. Yes, sir.

The CHAIRMAN. We will want that made a part of the record.

The bill of fare referred to is as follows:

FIRST SECTION.

Sunday.

Breakfast.—Rolled oats, fried ham, potato cakes, rolls and butter, coffee.

Dinner.—Vegetable soup, roast beef and gravy, potatoes, vegetable, dessert, coffee.

Supper.—Cold ham, creamed potatoes, biscuits, cake and sauce, tea.

Monday.

Breakfast.—Rolled oats, beefsteak and gravy, baked potatoes, batter cakes, coffee.

Dinner.—Bean soup, boiled ham, kale, potatoes, butter corn, dessert, coffee.

Supper.—Fresh sausage, potatoes, biscuits, apple sauce, tea.

Tuesday.

Breakfast.—Rolled oats, lamb chops, potatoes, rolls and butter, coffee.

Dinner.—Vegetable soup, beef stew (baked), potatoes, peas, pickles, dessert, coffee.

Supper.—Fried liver and gravy, potatoes, batter cakes, butter and jelly, bread and tea.

Wednesday.

Breakfast.—Rolled oats, baked hash, potatoes, corn bread and butter, coffee.

Dinner.—Potato soup, roast beef and gravy, potatoes and corn, dessert and coffee.

Supper.—Smoked fish, potato cakes, muffins and butter, tea.

Thursday.

Breakfast.—Rolled oats, bacon and potatoes, muffins and butter, coffee.

Dinner.—Vegetable soup, baked chicken, gravy, potatoes, vegetable, dessert and coffee.

Supper.—Codfish cakes, potatoes, fried mush, butter, tea.

Friday.

Breakfast.—Rolled oats, mackerel and hash, potatoes, rolls and butter, coffee.

Dinner.—Oyster soup and crackers, baked fish and roast beef, potatoes, vegetable, dessert and coffee.

Supper.—Fried eggs, fresh fish (alternate weeks), potatoes, biscuits and butter, tea, sauce.

Saturday.

Breakfast.—Rolled oats, beefsteak and gravy, potatoes, fried mush, butter, and coffee.

Dinner.—Pea soup, roast veal and dressing, potatoes, vegetable, dessert and coffee.

Supper.—Cold corned beef, potatoes, baked beans, bread and butter, tea.

SICK DIET.

Sunday.

Breakfast.—Rolled oats, Hamburg steak and gravy, creamed potatoes, toast and butter, coffee.

Dinner.—Vegetable soup, escalloped chicken, mashed potatoes, peas, baked custard.

Supper.—Rolled oats, cold ham, cake and toast, apple sauce, tea.

Monday.

Breakfast.—Rolled oats, breakfast bacon, corn bread, toast and butter, coffee.

Dinner.—Pea soup, beef loaf and gravy, rice, stewed tomatoes, floating island.

Supper.—Rolled oats, baked hash, biscuits and butter, prunes, tea.

Tuesday.

Breakfast.—Rolled oats, broiled steak and gravy, baked potatoes, toast and butter, coffee.

Dinner.—Vegetable soup, veal stew, rice and corn, tapioca pudding.

Supper.—Rolled oats, creamed beef, toast and butter, peach sauce, tea.

Wednesday.

Breakfast.—Rolled oats, beef cakes and gravy, creamed potatoes, rolls and butter, coffee.

Dinner.—Potato soup, roast lamb, peas, mashed potatoes, lemon jelly and sauce.

Supper.—Rolled oats, jelly cake, toast and butter, apple sauce, tea.

Thursday.

Breakfast.—Rolled oats, fried ham, corn bread, butter and toast, coffee.

Dinner.—Vegetable soup, roast beef and gravy, sweet potato loaf, onions, chocolate blanc mange, sauce.

Supper.—Rolled oats, creamed codfish, toast and butter, tea.

Friday.

Breakfast.—Rolled oats, creamed mackerel, baked potatoes, toast and butter, coffee.

Dinner.—Oyster soup and crackers, escalloped fish, mashed potatoes, corn, bread pudding and sauce.

Supper.—Rolled oats, scrambled eggs, toast and butter, apple jelly, tea.

Saturday.

Breakfast.—Rolled oats, lamb chops, baked potatoes, toast and butter, coffee.

Dinner.—Potato soup, beef stew, macaroni, vegetable, rice pudding.

Supper.—Rolled oats, hash on toast, butter, apple sauce, tea.

(Beef tea or chicken served every day.)

EMPLOYEES.

Sunday.

Breakfast.—Rolled oats, cold ham, fried potatoes, rolls and butter, coffee.

Dinner.—Vegetable soup, roast beef and gravy, browned sweet potatoes, vegetable, dessert and coffee.

Supper.—Baked beans, bread and butter, cake and sauce, tea.

Monday.

Breakfast.—Rolled oats, fresh sausage, fried hominy, rolls and butter, coffee.

Dinner.—Vegetable soup, boiled shoulder or corned beef (alternate weeks), kale and potatoes, desert and coffee.

Supper.—Baked hash, cinnamon bread, sauce, butter and bread, tea.

Tuesday.

Breakfast.—Rolled oats, beefsteak and gravy, potatoes, rolls and butter, coffee.

Dinner.—Bean soup, beef stew (baked), potatoes, vegetable, coffee.

Supper.—Cold sliced shoulder, biscuits and sauce, bread and butter, tea.

Wednesday.

Breakfast.—Rolled oats, baked hash, fried mush, rolls and butter, coffee.

Dinner.—Vegetable soup, bacon and liver, potatoes, vegetable, dessert, and coffee.

Supper.—Smoked fish, baked potatoes, sauce, gingerbread, tea.

Thursday.

Breakfast.—Rolled oats, fried shoulder, fried potatoes, rolls and butter, coffee.

Dinner.—Pea soup, roast beef, kale and potatoes, bread and butter, coffee.

Supper.—Cold corned beef, baked beans, buns and butter, tea.

Friday.

Breakfast.—Rolled oats, mackerel, potatoes, rolls and butter, coffee.

Dinner.—Bean soup, baked fish or codfish cakes (alternate weeks), potatoes, vegetable.

Supper.—Fried eggs or fresh fish (alternate weeks), potatoes, sauce, bread and butter.

Saturday.

Breakfast.—Rolled oats, beefsteak and gravy, corn bread.

Dinner.—Vegetable soup, beef (pot roast), gravy, potatoes, vegetable.

Supper.—Beef stew, sauce, bread and butter, tea.

GENERAL DIET.

Sunday.

Breakfast.—Baked beans, rolls and butter, coffee, cold ham, (working patients).

Dinner.—Roast beef and gravy, bread dressing, browned sweet potatoes, vegetable, apple pie, and coffee.

Supper.—Cake and peach sauce, bread and butter, tea.

Monday.

Breakfast.—Fresh sausage, fried hominy, rolls and butter, coffee.

Dinner.—Bean soup, crackers, boiled shoulder, corned beef (alternate weeks), kale, and boiled rice.

Supper.—Cinnamon bread, apple sauce, bread and butter, tea.

Tuesday.

Breakfast.—Fried shoulder (working patients), fried mush, peach sauce.

Dinner.—Beef potpie, turnips, steamed pudding, sauce, and coffee.

Supper.—Biscuits, prunes, bread and butter, tea.

Wednesday.

Breakfast.—Rolled oats, baked hash, rolls and butter, coffee.

Dinner.—Vegetable soup, crackers, bacon and liver, hominy, fried potatoes.

Supper.—Gingerbread, cheese and bread, apple sauce, tea.

Thursday.

Breakfast.—Rolled oats, baked beans, beef stew (working patients), rolls and butter, coffee.

Dinner.—Pea soup, crackers, boiled corned beef, kale, and bread cakes.

Supper.—Buns, rhubarb sauce, bread and butter, tea.

Friday.

Breakfast.—Codfish (butter sauce) or mackerel (alternate weeks), steamed potatoes, rolls and butter, coffee.

Dinner.—Baked fish or codfish cakes (alternate weeks), succotash and macaroni, sweet potato pie, coffee.

Supper.—Fresh bread, peach sauce, butter, tea.

Saturday.

Breakfast.—Beef steak and gravy, steamed potatoes, bread and butter, coffee.

Dinner.—Vegetable soup, crackers, boiled beef and gravy, kidney beans, turnips.

Supper.—Graham bread, butter, apple sauce, tea.

(Meat is served for working patients' supper.)

The CHAIRMAN. What I referred to more particularly is the preparation of the food, as to whether it is properly prepared.

Doctor CLARK. I have inspected the food quite a good deal. We have there now seven kitchens, I think, as distributing places. For instance, in the detached buildings we have a kitchen for the group. In the old building we have a kitchen. For the building opposite the administration building we have a kitchen. In the two buildings on each side of the administration building there are kitchens. We have about seven different kitchens there. I have inspected the food in various departments, and I can only speak in the most favorable terms of it, as a rule. Sometimes it may be poorly cooked, or something like that; but we generally try to get rid of those cooks, if they continue to serve food in a raw or uncooked condition. That matter was called to my attention some time ago.

One of the men cooks, in the Toner building, was repeatedly cautioned that his food was not thoroughly cooked, and he was told that he must be more careful. I think I cautioned him about twice or three times. I then took the matter to the superintendent and told him I had cautioned this man three times about the food and there were still complaints from the patients that at times the food was not properly cooked. So we discharged him right then, and put a new cook in. Since she has been there I have not heard very much complaint about the food. The food there, as a rule, is very good. It is of good quality and there is a fair quantity at all times.

The CHAIRMAN. Where do you get the most of the food; here in the city of Washington?

Doctor CLARK. I do not know about the purchase of it at all. I do not know a thing about that. I looked up the question of the milk supply yesterday. I knew something about the testimony here with regard to the food being deficient and of poor quality and I looked up the question of milk supply. We use a great deal of milk in this institution. In the hospital, B building, where we have 106 men, we use 15 gallons of milk a day. In one of my wards where I have 26 bedridden women, in conjunction with the regular sick diet they use 7 gallons of milk. There are about 26 patients, and every patient there gets a glass of milk between meals, at 10 o'clock, at 2

o'clock, and 8 o'clock, and probably at midnight. It is served in the form of a glass of milk or eggnog or a milk punch. Occasionally whisky is added—an ounce or a half ounce of whisky. That is daily. We use altogether in our sick wards throughout the institution 300 gallons of milk a day, and the sick wards get most of it. Most of our sick patients get milk on an average of every two hours. They get it at 10, at 2, and with their supper, and at meals. The milk is of very excellent quality. I think it is one of the best grades of milk in this country. It is from a tuberculin tested herd of cows.

The CHAIRMAN. Are the cows owned by the institution?

Doctor CLARK. Yes, sir.

The CHAIRMAN. Where are they kept?

Doctor CLARK. They are kept right in the rear of the administration building, back of that department. The milk is sterilized. Just as soon as it is taken into the storage house it is passed through the sterilizer at a temperature of about 160 degrees, and is taken from there to the cold storage, where it drops to a temperature of about 32 or 33 degrees, and it is kept there until it is used. That is done twice a day, with the morning and evening milk. The milk is not allowed to settle and the cream taken off, but it is served just as it is. It is of very rich quality and is a good grade of milk. The cows are visited by a veterinary surgeon once a week, and if a cow is in poor health she is put out of commission for a time or she is sold.

The CHAIRMAN. There is one other case I meant to speak to you about, and that is the case of Mrs. Lochte. Do you know anything about that?

Doctor CLARK. Yes, sir.

The CHAIRMAN. Have you got the record in that case?

Doctor CLARK. Yes, sir; I have the record in that case.

Mr. HAY. She said something about being fed with a tube when she was hungry and wanted to eat anyway; but that you insisted upon feeding her through a tube.

Doctor CLARK. Well, I can make the positive statement that I never feed a patient that would eat willingly. I do not care about feeding patients. It is not my desire to feed patients, nor is it the desire of the nurse to feed them through a tube, because it is not a pleasant process to do it. There is no time when a patient is not offered a meal and given an opportunity to eat it. It is brought and put down and allowed to remain there, because the patients will often eat a meal secretly if you go away and leave it there. The meals are left there for some time to give them that opportunity. If they do not eat it and will not eat it, I feel bound to feed such a patient. That was Mrs. Lochte's condition. When she came there the physician reported:

Patient becomes violent and assaults the nurses; tears the bed clothing, etc., screams, sings, and at times requires measures that will insure her own and others' protection from injury. Talks constantly and at random; makes hideous grimaces, struck and kicked the nurses; at times refuses nourishment.

It was my understanding, when she came to the hospital, that she had refused nourishment for a day or two; but I let her go the first day without feeding her. On the second day her condition was such that I felt it my duty to feed her. There is one condition about patients not taking food. They have a very peculiar odor about them.

You can tell it when you go into the room, at a distance of ten or fifteen or twenty feet from them. There is a peculiar sweetish odor about the breath, what we call the starvation odor. When I notice that odor I generally begin to feed them, because if a patient is allowed to go too long without food it is not a successful operation. There is an abnormal condition which develops because of the organ not being put to its proper use, and when you do feed them it is not responsive. The food may not be digested and the patient will become depleted, which may terminate in death.

The CHAIRMAN. Is there any other way of artificial feeding?

Doctor CLARK. I occasionally feed by the rectum. I recall one case where I kept an old lady alive in this institution for a long time by feeding by the rectum, and giving her a pint of salt water every morning. That was all she got. She simply lived on and on for a year and never took anything by the mouth. I did not care to feed her by the nose or mouth, as she seemed to be very feeble. She responded readily to the rectal food and we kept it up. I will say that we persist in our efforts to get the patients to eat. We coax them and plead with them and beg with them; but if they do not eat I feed them. I fed one patient for as long as eight months, and I am very glad I did feed her, because she has made a recovery.

She is home now, restored to her ordinary and normal health, and is now an entirely hearty woman. She never took a glass of water or anything at all except what she got by the feeding we gave her. I would feed her sometimes three and four times a day. I would feed her early in the day, at noon, and then late at night, because the hours were too long from night until morning. I felt that she needed something between times. That woman recovered.

The CHAIRMAN. Will you hand the record in the Lochte case to the stenographer and have it made a part of the record?

Doctor CLARK. Yes, sir.

The record referred to is as follows:

Ward transfer slip.

MARGARET LOCHTE, D. C. Indigent, admitted June 26, 1905.

GOVERNMENT HOSPITAL FOR THE INSANE.

SYNOPSIS OF RECORD.

Case No. 15424.

Name, Margaret Lochte.

Organization.

Date of admission, June 26, 1905.

Age, 36 years.

Social state, married.

Nativity, U. S. D. C.

Diagnosis of mental disease on admission, acute mania.

(Mania depression insanity.)

Supposed cause, ill health.

Duration on admission.

Admitted from D. C.

Date of previous admission and duration of treatment.

Disposition of remains in event of death.

Telegraph or telephone.

Address of friends or relatives, James Lochte, 433 Third street, NE.

DEPARTMENT OF THE INTERIOR,
GOVERNMENT HOSPITAL FOR THE INSANE.*Medical certificate.*

We certify that after a personal examination of the within-named person we find her to be insane. The following is a history of the case as far as we have been able to obtain it:

Name, Margaret Lochte; age, 36; sex, female; married; nativity, ———; education, yes; occupation, none; religion, Catholic; post-office address of friends, James Lochte; telegraph address, 433 Third street NE.

What relatives, including grandparents and cousins, have suffered from either of the following diseases: Insanity, epilepsy, chorea, hysteria, neurasthenia, tuberculosis? Unknown.

Were parents addicted to excessive use of alcohol, opium, chloral, or other narcotics? Unknown. Habits of patient as to same, unknown.

Previous peculiarity of patient as to temper, conduct, etc. Unknown.

Has patient had epilepsy, apoplexy, syphilis, tuberculosis, heat exhaustion, or other serious physical disease? Unknown.

Evidence of sexual excess or abnormal sexual habits? Unknown.

History of previous attacks, if any? Unknown.

When and how did the first symptoms of the disease become manifest? Unknown.

Was there, previous to that date, any change in disposition, or evidence of physical or mental depression or disorder? Unknown.

Describe as fully as possible the present symptoms of insanity. Patient has hallucinations of sight and hearing, sees the Holy Ghost and talks with Him, imagines she knows people whom she has never met before.

What are the probable causes of the present attack, either predisposing or exciting? Unknown.

Do suicidal or homicidal tendencies exist; if so, how manifested? Assaulted several nurses.

In what institutions, if any, and when has patient received treatment? Washington Asylum Hospital.

What special medical treatment has patient received during this attack? Hot pack; sulphonal and trianol; mist. bromid.

QUESTIONS FOR FEMALES.

Number of children, ———; age of youngest, ———; number of miscarriages, ———; date of last one. ———. Has patient had any uterine or ovarian disease? What menstrual irregularities, if any?

We hereby certify that the foregoing history is as complete as the opportunities at our command will permit.

Examining physicians or surgeons? D. Percy Hickling, M. D., post-office address, 1304 Rhode Island avenue; Wm. B. French, M. D., post-office address, 506 East Capitol street.

REMARKS.

Patient becomes violent and assaults the nurses; tears the bed clothing, etc., screams, sings, and at times requires measures that will insure her own and others' protection from injury; talks constantly and at random; makes hideous grimaces; struck and kicked the nurses; at times refuses nourishment.

MARGARET LOCHTE. Case No. 15424. Admitted June 26, 1905. Age, 36 years. Widow. Nativity, United States. Education, limited. Education, none. Religion, Catholic.

Family history: Father dead. He was an inmate of this hospital (Henry Shelly). Mother living in Washington, and is in good health. One brother living and in good health.

Personal history: Patient was married at the age of 16. Has had six children; five now living; one died at the age of two and one-half years. Patient states that she had the ordinary diseases of childhood, but no serious illness since, except occasional attacks of nervousness. Present illness began in May last while the patient had her children in the country on a visit.

Present condition: Patient is a large, well built, white woman, with brown hair, blue eyes, and an intensely anxious facial expression.

Glandular and osseous systems: Normal.

Muscular system: Muscles are very well developed and efficient in tone.

Circulatory system: Apex beat is visible and palpable in the normal position. The sounds are clear and distinct. Pulse 88, regular.

Respiratory system: Shows nothing abnormal. A large, well developed chest.

Nervous system: There is nothing abnormal apparent. No pain, and all of the reflexes respond promptly.

Mental examination: There is a slight degree of clouding of consciousness and confusion in the patient's mind. She is extremely apprehensive of danger, and when first brought into the examination room refused to answer questions, and held the nurse's hand as though she was anticipating some evil. When assured that we were simply making a routine examination she then answered all the questions asked her in a very intelligent manner. Her ideation is somewhat slow, but coherent. Her memory for past events is accurate, but since the first manifestation of her mental trouble she has no correct memory of what has transpired. No delusions could be elicited, but upon the subject of religion the patient is considerably confused, and undoubtedly has had hallucinations of hearing. Since the patient's admission to the hospital she has had one or two very acute attacks of excitement, and became extremely noisy and rough in her manner. It was about all two nurses could do to control her. When questioned about these attacks she gives as her answer that she fears some one is going to do her harm, and she thinks it is necessary for her to defend herself.

Previous to her admission to the hospital she had several outbreaks, and injured one or two nurses quite severely. Emotional condition is one of depression. During the intervals between her excited periods she sits quietly in the ward and will not volunteer to talk or associate with the other patients. She is rather tidy and neat in her appearance, extremely impulsive, and lacks volitional control. Has refused food for a day or two at a time, and it is necessary to feed her.

GOVERNMENT HOSPITAL FOR THE INSANE.

WARD NOTES.

MARGARET LOCHTE; Ward C1; date of entry, June 26, 1905.

Hour.	Temp.	Pulse.	Resp.	Urine, ozs.	Stools.	Case notes.
a. m. p. m.						
June 26, 1905						Patient received in ward at 5 p. m. Quiet. Given bath. Clothes very dirty. Vermin in head. Had a number of bruises in body. Did not want to go to bed. Had to be undressed. Slept fairly well.
June 27, 1905						Patient had to be dressed this a. m. Would not eat any breakfast. Resisted when trying to carry to meals. Fought the nurses. Put in pack for 2 hrs. by Drs. orders. Very quiet when taken out, but still refused to eat. Tube fed at night.
June 28, 1905						Patient kept in bed all day. Very quiet. Had to be tube fed this a. m. Ate dinner and supper. Appetite fairly good.
July 11, 1905						Patient very much improved. Very pleasant to all around. Assists with ward work. Appetite very good. Sleeps very well. Talks a great deal of going home and of her children.
August 9, 1905						Patient's condition continues about the same. Went home on the 5th of August for all night and Sunday. Has been a little disturbed since return. Appetite very good. Assists with ward work.
September 1, 1905						Patient's condition seemed much improved. Resisted being bathed. Helped with dining room work. Very pleasant to all around. Went home Sept. 18, 1905.

GOVERNMENT HOSPITAL FOR THE INSANE.

CASE NOTES.

September 18, 1905.—General health very good. Mentally the patient gradually improved after her admission and was granted a trial visit home. September 18 apparently in a normal state. Her mind was clear and she answered correctly

and intelligently all questions. Emotional state normal, and she was grateful for her care and treatment. She did not have a good insight into her periods of excitement and could not understand why she became so disturbed and impulsive. Patient had several impulsive attacks, and during these seizures she was hard to control and quite violent and would attack the nurses. Appetite good, rests well at night. Neat and tidy in habits.

The CHAIRMAN. Will you describe the operation of feeding with a tube, and what a tube looks like?

Doctor CLARK. The tube is simply a rubber tube about 30 inches long. It is passed through the nares or through the mouth into the stomach. For a long time we used the mouth speculum, forcing the mouth open and putting the speculum in to keep it open, then passing the tube, by the mouth, into the stomach. That is an operation that requires a certain amount of strength. You have got to force the mouth open, or pry it open, and you are liable to break the teeth or injure the lips. Therefore we do not resort to that method. The tube is passed through one side of the nose right into the stomach. Two nurses generally assist the doctor. He holds the head of the patient and passes the tube, while the nurses hold the hands.

As soon as it strikes the stomach we get a peculiar sound, which you can hear, the escape of a little flatus or gas. Then we know it is in the stomach. Most of the tubes are marked, but it is not always necessary to have the mark on them, because we can tell just as the tube enters the stomach because there is a little escape of flatus. Then the food is poured right through the funnel into the stomach. The most important thing about tube feeding is the withdrawal of the tube. The tube must be constricted entirely, and held very tightly, and pulled clear out of the nose. If you let go of the tube as you are passing the larynx or trachea, you are liable to drop the food back into the lungs, and you will probably set up a case of inhalation pneumonia. We are very careful to draw the tube clear out of the body before we let go of it, and in that way we do not lose a drop of the food.

I must say that I have never had an accident by tube feeding, and I have fed a great many people in my thirteen years' experience. I have never had a case of pneumonia develop. Some physicians have had that trouble, and it is possibly due to the fact that occasionally a patient will vomit alongside of the tube as you put it in and the food will get into the larynx, and in that way develop inhalation pneumonia.

The CHAIRMAN. Did you hear the testimony of Doctor Reyburn?

Doctor CLARK. No, sir; I did not hear it.

The CHAIRMAN. Doctor Reyburn testified that he had once in the course of his practice fed a patient with a glass tube between 4 and 8 inches in length. From your experience, does that seem possible?

Doctor CLARK. No; because it would not be long enough to reach the stomach.

The CHAIRMAN. In other words, when the patient is fed through the nose or mouth the tube must reach the stomach?

Doctor CLARK. Yes, sir; it must reach the stomach. Otherwise, if it goes just into the esophagus, it will regurgitate and come up and cause trouble. It will run into the lungs. A glass tube would have to have a sharp bend at the anterior of the nares, and you could not pass a glass tube through there. It would be utterly impossible to do it.

The CHAIRMAN. It would break the tube?

Doctor CLARK. Yes, sir. We do not even use a glass catheter into the bladder, and that canal is straight and is only about 3 inches long, for fear we might break it and lose the other end in the bladder. Therefore we resort to a silver catheter in these cases. We do not use glass tubes in those cases at all. It would be unwise and unsafe.

The CHAIRMAN. You know about the case of Mrs. Sadie Wright and Mrs. Lottie P. Wright?

Doctor CLARK. Yes: both of those ladies were under my care while they were in the institution and I have the history here of both of them.

The CHAIRMAN. I wish you would give us a summary of their treatment.

Doctor CLARK. Mrs. Lottie P. Wright was a young lady admitted to the hospital November 11, 1904, and discharged December 11, 1904. She was in the institution just one month.

The CHAIRMAN. How did she come to go there?

Doctor CLARK. It was a case of puerperal insanity in a mild degree, following confinement, and acute confusional insanity. She was there about two or three weeks before she commenced to clear up. During that time she was simply in a state of confusion all the time, and if not restrained she would wander about the ward in an aimless manner.

She had an accident at her confinement which necessitated that we should keep the woman in bed. I think she had a laceration, and it required surgical treatment or at least treatment in a recumbent position, and there was a certain amount of restraint used. She made rather a rapid recovery. In four weeks, while not entirely well, she was in very good condition and was permitted to leave the hospital. Her husband took her out and I have always thought she made a rapid recovery. In fact I have seen her husband quite a number of times and he was always very anxious to tell me how his wife was getting along, and he said that she was in the best of health.

The CHAIRMAN. I think she testified that rest sheets had been used to confine her.

Doctor CLARK. The rest sheet was used in her case for a short time, I think.

The CHAIRMAN. Will you describe what a rest sheet is?

Doctor CLARK. A rest sheet is a little bit different from an ordinary sheet, in that it is a sheet that buttons over the bed and keeps the patient underneath. She testified that she could not move her arms or limbs. It is possible that she could not use her limbs, because we had her limbs bandaged together. She had a laceration, and that is the treatment for that condition. We put a bandage right around her thighs to keep her from separating them and pulling out the stitches that were put in there by the surgeons. She was a puerperal case and was admitted there within ten or eleven days after her confinement, and those cases require that they should be kept in bed for some little time.

Mr. HAY. What is this sheet made of?

Doctor CLARK. Any grade of material, ducking or canvas.

Mr. HAY. What was this particular sheet made of?

Doctor CLARK. I do not remember, but probably of a grade of canvas. It was buttoned alongside of the bed, and if it had not been for the fact that this young lady was bandaged together to keep her

from separating the thighs her limbs would have been perfectly free and she could have kicked around as much as she pleased. Her arms were perfectly free. The only restraint was that she was confined to the bed, so that she could not get up and run around. I have a note here which was made at the time. I never expected to hear of this case again. This woman expressed herself as being pleased that the rest sheet was put on. In reading these notes over I notice one made November 18. Under the head of general treatment it says:

Strych. sulph. gr. $\frac{1}{10}$ per mouth, 2, 4 hours, 8, 12, 4. Egg nogg at 11, 3, 7. Vaginal douche of carbolic acid $\frac{8}{10}$ per cent. Catheterize g-8 hours. If urine not voided, Lithia tab. a, 9, 1, 3.

Out of restraint during night. Restless; would not remain in bed.

Rx. Trional grs. X a, 3 a. m.

Slept well since voiding urine; restless since 7 a. m. Climbing up in window. Would not remain in bed. Restraining sheet put on at 9.30 a. m. Says: "She likes it on," talking a little at times.

The CHAIRMAN. That refers to the case of Mrs. Lottie P. Wright?

Doctor CLARK. Yes, sir.

The CHAIRMAN. Will you hand to the stenographer the record in that case, and let it be made a part of the record?

Doctor CLARK. Yes, sir.

The record above referred to is as follows:

WARD TRANSFER SLIP.

Lotta P. Wright, District of Columbia, indigent. November 11, 1904. Home on visit December 11, 1904.

GOVERNMENT HOSPITAL FOR THE INSANE.

SYNOPSIS OF RECORD.

Name, Lotta P. Wright; case No. 15026; date of admission, November 11, 1904; age, 24; social state, married; nativity, United States, District of Columbia; diagnosis of mental disease on admission, acute confusional insanity; supposed cause, childbirth; neurotic temperament; duration on admission, eleven days; admitted from District of Columbia; address of friends, post-office, George C. Wright, 1408 First street NE.

DEPARTMENT OF THE INTERIOR,
GOVERNMENT HOSPITAL FOR THE INSANE.

MEDICAL CERTIFICATE.

We certify that, after a personal examination of the within-named person, we find her to be insane. The following is a history of the case as far as we have been able to obtain it:

Name, Lotta P. Wright; age, 24; sex, female; married; nativity, Washington, D. C.; education, grammar school; occupation, housewife; religion, Methodist; post-office address of friends, George Coke Wright, 1408 First street NE., Washington, D. C.; telegraph address, same as line above.

What relatives, including grand parents and cousins, have suffered from either of the following diseases: Insanity, epilepsy, chorea, hysteria, neurasthenia, tuberculosis? Father was an inmate of Government Hospital for Insane eleven years. See record of John W. Rosewag.

Were parents addicted to excessive use of alcohol, opium, chloral, or other narcotics? Yes; father.

Habits of patient as to same, none at all.

Previous peculiarity of patient as to temper, conduct, etc., always mild and quiet.

Has patient had epilepsy, apoplexy, syphilis, tuberculosis, or other serious physical disease? No.

Evidence of sexual excess or abnormal sexual habits? None.

History of previous attacks, if any. None.

When and how did the first symptoms of the disease become manifest? Melancholy after childbirth. Child now eleven days old.

Was there, previous to that date, any change in disposition, or evidence of physical or mental depression or disorder? No.

Describe as fully as possible the present symptoms of insanity. Very restless; speaks rarely; compelled to use catheter and rectile injections.

What are the probable causes of the present attack, either predisposing or exciting? Childbirth in a neurotic person, also albumen in urine.

Do suicidal or homicidal tendencies exist; if so, how manifested? No.

In what institutions, if any, and when, has patient received treatment? None.

What special medical treatment has patient received during this attack? Bromides and strychnine; stimulating diet, also hyoscine hydrobromate.

QUESTIONS FOR FEMALES.

Number of children, 1; age of youngest, eleven days; number of miscarriages, 0; date of last one, October 31, 1904.

Has patient had any uterine or ovarian disease? No.

What menstrual irregularities, if any? None.

We hereby certify that the foregoing history is as complete as the opportunities at our command will permit.

CHAS. M. EMMONS, M. D.,
1100 Pennsylvania avenue SE.,

E. L. MASON, M. D.,
1909 Fourteenth street NW.,

Examining Physicians or Surgeons.

Date, November 10, 1904.

NOVEMBER 16, 1904.

Lottie P. Wright, case No. 15921; admitted, November 11, 1904; age, 24 years; civil condition, married; nativity, United States.

Family history.—Father was a patient in this institution; was United States criminal, and suffered with chronic melancholia, said to be due to an attack of grippe. He is now out on a visit, apparently well. He was addicted to the use of alcohol. Family history otherwise not determined.

Previous history.—Patient gave birth to a child eleven days previous to admission. This, with her neurotic temperament, is given as the cause of her mental derangement. Medical certificate states that she had a mild, quiet disposition, and that on examination for admission was depressed, very restless, and talked incoherently. Also, that she had albumenuria.

Present condition.—The patient is a small, well built, and fairly well nourished young white woman, with a mildly heavy suit of auburn hair, and an intensely anxious and distressed facial expression. Physical examination of the thoracic and abdominal viscera fails to show any abnormality of note. There is a small palpable mass in the lower part of the abdomen. The heart is quite rapid; pulse is weak. There is no marked abnormality of the nervous system; the patella reflex is exaggerated, and the organic reflexes are defective. Patient passes her urine and feces in bed. The patient has a vaginal discharge, and there is a slight laceration of the perineum. Examination of urine shows a mild degree of albumenuria.

Mental examination.—The patient has been in the hospital for the past five days and has been markedly confused and restless the entire time that she has been awake. She is exhausted, refuses to stay in bed, is excited at times, and on this account it has been necessary to use the rest sheet at intervals. There is a marked clouding of consciousness, she has no idea where she is, and is also disoriented for time and person. Emotional condition is one of fear and apprehensiveness. She imagines that someone is going to do her harm, resists the nurses, and it is with difficulty that she can be induced to take sufficient nourishment and medicine. When not confined to her bed she stands up in her room, and gets out on the window sill. When her door is left open she wanders aimlessly about the ward among the other patients and can not be induced to sit down. She seldom speaks, but from the few words she has spoken when alone and her general manner, it is suspected that she has hallucinations of hearing.

NOTE. December 9, 1904.—The patient's mental condition has greatly improved during the past two weeks. She has also improved physically. Her

consciousness has cleared markedly, but she still is somewhat apprehensive and worries quite a little at times. Is quite anxious to go home. She is not untidy in her habits now and not so resistive as formerly.

NOTE. December 11, 1904.—Husband was given permission to take the patient home on a trial visit to-day. Her condition has improved slightly since last note.

EXAMINATION OF URINE.

Case No. —; name, Lottie P. Wright; ward, Elm; date, November 12, 1904; analysis required, for records.

Physical and chemical characters.—Quantity in twenty-four hours, not estimated; color, yellow; reaction, acid; odor, normal; specific gravity, 1.020; quantity and character of the sediment, cloudy.

Normal constituents.—Urea, uric acid, chlorides, sulphates, urine-Indican, mod. amt.; urobilin, normal; earthy phosphates; alkaline phosphates; other normal constituents.

Abnormal constituents in solution.—Albumin, present, small amt.; other proteids; sugars, absent; acetone; diacetic acid; abnormal coloring matters.

Microscopical examination.—Crystals and amorphous deposits, urates; casts, doubtful; anatomical elements, etc., fat globules, epithelial cells, pus cells, bacteria.

CORNELIUS DE WEISE, M. D., *Analyst.*

Examination of urine.—Case No. —; name, Lottie P. Wright; ward, Elm; date, December 5, 1905; analysis required, for diagnosis.

Physical and chemical characters.—Quantity in twenty-four hours, not estimated; color, light yellow; reaction, acid; odor, normal; specific gravity, 1.020; quantity and character of the sediment, clear.

Normal constituents.—Urea, uric acid, chlorides, sulphates, urine-Indican, urobilin, earthy phosphates, alkaline phosphates, other normal constituents.

Abnormal constituents in solution.—Albumin, absent; other proteids, sugars, absent; acetone, diacetic acid, abnormal coloring matters, absent.

Microscopical examination.—Crystals and amorphous deposits, absent; casts, absent; anatomical elements, etc., mucus.

Conclusion and diagnosis.—Urine normal.

CORNELIUS DE WEISE, M. D., *Analyst.*

WARD NOTES.

Name, Mrs. Wright; ward, Elm; date of entry, November 11, 1904.

November 11, 1904: Patient brought to ward on stretcher about 2 p. m. Put to bed—given a sponge bath. Person and clothing in fairly good condition. Vaginal douche; milk 4 ozs. Lithia tab. in glass of water 4 hrs. 9.30, 1.30, 5.30, 9.30. Catheterized at 8 p. m. Restless at 2.30 a. m. Voided urine at 1.30. Took nourishment fairly well. Hot whisky punch at 2.30 a. m. Slept well since; coughed at intervals.

November 12, 1904: Catheterized at 8 a. m. Bowels did not move. Took nourishment fairly well. Simple enema at 11 a. m. Breast massaged and pumped. Small soft-formed stool.

November 12, 1904: General treatment—eggnog at 11, 3, 7. Light diet. Catheterized if she does not void urine q 8 hrs. Breast massaged and pumped. p. r. n. At 4 p. m. per catheter. 11 p. m. Quiet and slept fairly well. Took nourishment fairly well.

November 13, 1904: Very restless and much disturbed at 6 p. m. Would not remain in bed.

November 14, 1904: Put in strait sheet at 8 p. m. Sheet removed at 8 a. m.; became disturbed; would not remain in bed. Sheet put on at 10 a. m. Refused medicine.

November 14, 1904: General treatment—strych. sulph. gr. 1.60 q 4 hrs.—8, 12, 4. Eggnog at 11, 3, 7. Special diet. Knees bandaged together. Strait sheet when disturbed.

November 15, 1904: Refused med. and nourishment. At times refused to swallow. Voided urine once during day. Enema high at 8 a. m. Small constipated movement. Refuses to talk. Out of restraint since 3 p. m. Took eggnog and ate supper.

November 16, 1904: Became very much excited and restless from 8 p. m. until 9.30 p. m. Slept fairly well since 10 p. m. Bowels moved slightly. Restraining sheet put on at 9 p. m. Refused nourishment and med.

November 17, 1904: General treatment—strych. sulph. gr. 1/60 per month at 12, 4, 8. Vaginal douche. Catheterized of 8 hrs. if urine not voided. Egg-nog of 4 hours, 11, 3, 7. Bowels have not moved; restless and disturbed early this a. m. Sheet put back on. Continued restless and trying to get out of restraint. Crying "please, please." Could not get her to say what she wanted. Voided urine once. R, high enema at 10.30 a. m. Bowels moved; large hard-formed stool; voided urine. Ate very good dinner. Asked for her father. Quiet and remaining in bed since 11 a. m. Seems fairly comfortable.

November 18, 1904: General treatment: Strych. sulph. gr. 1/60 per mouth q. 4 hrs. 8, 12, 4. Egg-nog at 11, 3, 7. Vaginal douche of carbolic acid—180 per cent; catheterize q. 8 hrs. if urine not voided, Litha tab. at 9, 1, 5. Out of restraint during night; restless; would not remain in bed. R. Trional grs. X at 3 a. m. Slept well since voided urine. Restless since 7 a. m. Climbing upon window. Would not remain in bed. Restraining sheet put on at 9.36 a. m. Says "she likes it on," talking a little at times.

November 30, 1904: Patient improved generally. Sleeps well out of restraint. Restless during day. Bowels reg. Voids urine. Habits untidy.

December 1, 1904: General treatment. Strych. sulph. gr. 1/60 per mouth q. 4 hrs. 8, 12, 4. Special diet. Slept well; somewhat restless during day. Wants to get up. Appetite fairly good. Bowels regular.

December 2, 1904: Patient up greater portion of day; complained of headache. Bowels constipated. Cascara. miet. G. at 7 p. m.

December 6, 1904: Imagines people are talking about her. Complains of being nervous. Habits tidy. Bowels constipated. Sleeps very well.

December 9, 1904: General treatment: Strych. sulph. gr. 1/60 per mouth at 8, 12, 4. Special diet. Physically patient improved. Mentally patient worries great deal. Very anxious to go home. Appetite very good. Bowels constipated. Habits tidy. Sleeps very well.

Mr. HAY. Mrs. Lottie P. Wright testified that a young girl came into the room and disturbed her; did she complain to you and you did not take any notice of the complaint?

Doctor CLARK. I do not recall that specific instance. She may have complained to me. The patients do run in and out of the room. I know that Mrs. Wright had a single room while she was there; I remember that. We could not control the actions of the patients at all times in a ward like that, and they probably do go in and out of each other's rooms.

The CHAIRMAN. Have you the record in the case of Mrs. Sadie C. Wright?

Doctor CLARK. Yes; I have here the record in the case of Mrs. Sadie C. Wright, who was the mother-in-law of Lottie P. Wright. She was admitted to the hospital on the 28th of March, 1905, and died on April 7, 1905, at 8.10 o'clock p. m. I think her son testified here that she died within five days. She was in the hospital about eleven days. I remember this case very well, as it was a very interesting one. This woman had a case of exophthalmic goiter—that is, an enlargement of the gland in the neck, with moderate protrusion of the eyeballs. She was suffering from what is known as a case of exophthalmic goiter. It is also known as Graves's disease and Basedow's disease.

Mr. HAY. Does it come from the heart?

Doctor CLARK. The heart is generally affected. This woman's heart was affected. She had pulse running from 130 to 160. You could see it beating all over her chest, and the muscles in the neck would throb. Her mental picture was one of active delirium all the time from the time she entered the asylum until she died. You can simply picture a very severe case of typhoid fever with very active delirium and you have a picture of her case. She would throw herself from one side of the bed to the other and kick, and it was hard

to keep her there. I see here that it was hard to get her to take nourishment. I attempted to feed her once, but on account of the action of her heart I was afraid of it and I quit it. I did give her hypodermic flushes—that is, I gave her salt under the skin. I put from 12 to 14 ounces of salt solution under the skin, but nothing we did for this case seemed to benefit her, and she wore herself out and died from exhaustion. These cases of mental trouble with this disease are rather rare and the mortality rate is very high. Patten, in his work, reports 43 cases, and I think only 6 out of the 43 recovered.

The CHAIRMAN. Her son, George C. Wright, testified that when his mother was taken out of the hospital she was covered from head to foot with bruises. Do you know anything about that?

Doctor CLARK. I would answer that in this way: I have examined the woman and have seen her arms and chest frequently. We have here a record that she had a tumor of the abdomen—a floating tumor that we could move around in various places. At the first examination, when we found this tumor, we did not find what we called the area of dullness for the spleen, but we found around here on the front an organ that, in all probability, was a floating spleen, or possibly a floating kidney. I remember of examining that tumor and that frequently I would listen to her heart, and I never saw a bruise on her chest or abdomen.

I have seen her arms, and she did have some bruises on her arms and on her knuckles. The skin was knocked off where she struck the wall, and possibly some was knocked off her legs and other portions of the body. I know that I saw the greater part of her anatomy, and I never saw any bruises except on the arms and feet.

Mr. HAY. Those resulted from her condition?

Doctor CLARK. Yes; and the bruises that she had on her after death may have been due to post-mortem changes. It is hard to tell a post-mortem change from an ordinary bruise.

The CHAIRMAN. In other words, you mean that when decomposition sets in it causes the same appearance that a bruise might cause?

Doctor CLARK. Yes, sir. I have understood that this woman was in a very feeble state of health when she came there. She had chronic nephritis, and there was a marked murmur in her chest. These were noted in the original examination of this patient. This is another case which I never expected to hear from, because she seemed to be very well satisfied at the time that we did all we could for her. We have a very good and complete history of that case.

The CHAIRMAN. The history of the case may be part of the record. The record referred to is as follows:

GOVERNMENT HOSPITAL FOR THE INSANE.

SYNOPSIS OF RECORD.

Case No. 15239; name, Sadie C. Wright; date of admission, March 28, 1905; age, 44 years; social state, widow; nativity, United States. Diagnosis of mental disease on admission: Agitated melancholia. Supposed cause: Exophthalmic goiter. Duration on admission: Probably two years. Admitted from District of Columbia.

MEDICAL CERTIFICATE.

We certify that after a personal examination of the within-named person, we find her to be insane. The following is a history of the case, as far as we have been able to obtain it:

Name, Sadie C. Wright; age, 44; sex, female; widowed; nativity, United

States of America; education, good; occupation, Government Printing Office, examiner; religion, Protestant.

What relatives, including grandparents and cousins, have suffered from either of the following diseases: Insanity, epilepsy, chorea, hysteria, neurasthenia, tuberculosis? None.

Were parents addicted to excessive use of alcohol, opium, chloral, or other narcotics? No.

Habits of patient as to same: Negative.

Previous peculiarity of patient as to temper, conduct, etc. Has nervous temperament.

Has patient had epilepsy, apoplexy, syphilis, tuberculosis, heat exhaustion, or other serious physical disease? No.

Evidence of sexual excess or abnormal sexual habits? No.

History of previous attacks, if any: No.

When and how did the first symptoms of the disease become manifest? Four days ago, when she began talking irrationally.

Was there, previous to that date, any change in disposition or evidence of physical or mental depression or disorder, No.

Describe as fully as possible the present symptoms of insanity: Delusions of persecutions; talks irrationally; mental depression.

What are the probable causes of the present attack, either predisposing or exciting? Change of life.

Do suicidal or homicidal tendencies exist; if so, how manifested? Very likely.

In what institutions, if any, and when, has patient received treatment? None.

What special medical treatment has patient received during this attack? Don't know.

QUESTIONS FOR FEMALES.

Number of children, 3; age of youngest, 13 years; number of miscarriages, 3.

Has patient had any uterine or ovarian disease? No.

What menstrual irregularities, if any? Menstruates irregularly.

We hereby certify that the foregoing history is as complete as the opportunities at our command will permit.

Examining physicians or surgeons:

C. C. BRADBURY, M. D.,

Post-office address, 1121 Fourteenth street NW.

E. L. MASON, M. D.,

Post-office address, 1909 Fourteenth street NW.

MARCH 28, 1905.

GOVERNMENT HOSPITAL FOR THE INSANE.

EXAMINATION OF URINE.

Name, Mrs. Sadie Wright; analysis required, record; date, April 3, 1905.

Physical and chemical characters: Color, yellow; specific gravity, 1025.

Abnormal constituents in solution: Albumen, present (trace); sugars, absent.

Microscopical examination: Crystals and amorphous deposits, amorphous urates; casts, absent; anatomical elements, etc., a few cylindroids.

MARCH 31, 1905.

Sadie C. Wright. No. 15239. Admitted: March 28, 1905; age, 44 years; social condition, widow; nativity, United States.

Personal history and family history: Not obtained.

Medical certificate states that she has a nervous temperament, and four days ago began talking irrationally. She has delusions of persecution, talks irrationally, and is mentally depressed. Cause given as change of life, and she is suspected of being suicidal.

Present condition: Patient is confined to bed, is quite weak, complains of pain in the left side, and has a slight elevation of temperature. She has occasional cough with slight expectoration. She is a tall, poorly nourished, and emaciated white woman. Her hair is brown, with a little gray; eyes light blue; facial expression is one of deep depression and anxiety. The skin is moist, circulation poor. Finger nails are thin and irregular. Lymphatic glands show

no enlargement, excepting the left cervical group, which are slightly enlarged. Muscles of the body are wasted, soft, flabby, and deficient in tone. The thyroid gland is enlarged, and there is marked pulsation of the vessels of the right side of the neck, with a less marked degree on the left side. The heart's action is rapid, 128 per minute, and regular. There is a marked pulsation of the fourth, fifth, and sixth interspaces, also in the region of the epigastrium.

The point of maximum impulse is in the fifth interspace in the mammary line. The force of the impulse is markedly accentuated. There is a systolic murmur at the apex and transmitted toward the axilla; also can be heard at the angle of the scapula. There is evidence of cardiac weakness seen upon the slightest exertion of the patient. Pulse is regular, weak, and easily compressed.

Respiratory system: The muscles of the chest are wasted, the ribs and clavicles are prominent, and the mammary glands small. Chest walls symmetrical. Patient has a cough, but aside from broncho-vesicular breathing over the middle of the right lung, nothing abnormal can be made out.

Alimentary system: Tongue is coated. The abdomen flat and unsymmetrical, there being a slight prominence just below the costal margin on the left side; walls are thin; liver dullness extends to a finger's breadth below the costal margin. On percussion there is no dullness over the normal splenic area. What appears to be the spleen can be palpated and freely movable just below the margin of the ribs. This organ appears to be considerably enlarged and it can be moved forward nearly to the umbilicus and upward under the costal margin. The percussion note over this tumor is flat. It is somewhat tender to the touch and the patient apparently suffered pain during the examination. She also became nauseated just after the examination.

Urinary system: (See Urinalysis.)

Nervous system: Patient's movements are slow, and there is considerable incoordination. She can not stand alone without assistance; this is probably due to weakness. There is no paralysis, or paresis. There is a marked tremor of the hands when the arms are extended and the fingers separated, and there is a marked tremor in her voice when talking. The patella reflexes are slightly exaggerated; no ankle clonus or Babinski reflex. The pupils are dilated and respond fairly promptly to light and accommodation. There is a mild degree of exophthalmus. Organic reflexes is under volitional control.

Sensory system: The patient undoubtedly suffers pain in the region of the abdomen. Owing to the fact that she is quite delirious, satisfactory answers can not be obtained in reply to questions. She undoubtedly has hallucinations of vision and hearing. The other sensibilities could not be tested.

Mental examination: There is considerable clouding of consciousness. Patient is disoriented for time, persons and place. She does not know the nature of the hospital, she does not know the day of the month or the week, and mistakes persons who are caring for her, calling them by other names. Her ideation is flighty, fleeting, and incoherent. She is unable to express herself intelligently or answer correctly the simplest questions. Her memory is very defective for past or recent events. No fixed delusions could be discovered. Her emotional condition is one of extreme depression and anxiety. She apparently has hallucinations of hearing and seeing, and becomes very much excited and restless, throwing herself about in bed, removing the covering, and talking in a loud and incoherent manner. She takes nourishment reluctantly and only in small quantities at a time. Her sleep has been quite disturbed since she has been in the hospital, and the only rest that she has obtained was under the administration of hypnotics. She is untidy in her habits.

APRIL 8, 1905.

NOTE.—The patient died at 8.10 p. m., yesterday, April 7, 1905. There was no improvement whatever in her condition after admission, but she gradually grew weaker as time passed. She was in an active delirium most of the time, talking loudly and in an incoherent manner; very restless, and hard to control and keep in bed. Her heart's action most of the time was very rapid, sometimes ranging as high as 160 per minute. She had marked nervous symptoms, marked tremor of the hands, and toward the last refused nourishment and medicine. Patient gradually grew weaker, and died on the evening of the 7th, at 8.10 o'clock.

WARD NOTES.

Mrs. Sadie C. Wright. Ward C, first. Date of entry, March 28, 1900.

March 28, 1905. Patient walked to ward at 5.15 p. m. Bathed; person and clothing very dirty. Slept about two hours during the night

R, Sol. Potass. Bromi Zii.

Sol. Chlo. Hydt. Zi.

March 29, 1905. Patient up and dressed. Walked to dining room. Ate very little breakfast. Lying down on couch greater part of day.

Milk Zvi at 11-3-5. Slept about two hours during the night. R, Sol. Potass Bromi Zii. Sol. Chlo. Hydt. Zi at 12.30 a. m. R, Sol. Potass Bromi. Zii. Sol. Chlo. Hydt. Zi at 5 a. m.

March 30. R, Simple enema at 8 p. m. Good result. Calomel tab. $\frac{1}{4}$ gr. 12 tab. (1) g., 15 min. followed by Salts Zi. Milk Zvi q. 2 hrs. Patient remains in bed.

March 31, 1905. Patient excited and noisy last night until 9.30 p. m. R, Sol. Potass. Bromi Zii. Sol. Chlo. Hydt. Zi at 10.45 p. m. Slept about four hours during the night. Seemed nauseated at times. Did not vomit. Bowels moved twice. Stood liquid. Ice cap applied over heart. Milk Zviii p. 2 hrs. at 10-12-2-4-6. Very excited at times during the day; tries to get out of bed. Talks a great deal. Milk Zvi q. 2 hrs. 8-10-12-2-4-6-8. R, Sol. potass. Bromi. Zii at 2.10 p. m. and 5.10 p. m. and 7 p. m. Voided urine at 5.30 p. m. q. S. Ice cap applied over heart. R, Trional Powd. grs. XV at 9 p. m. Slept until 4 a. m. Very excited and noisy until 6 a. m.

April 1, 1905. R, El., Ammon. Val. Zss. Sol. Potass. Bromi. Zii at 6.15. a. m.

April 5, 1905. Very restless during the day. Restrained in strait-sheet. Voided urine q's. Simple enema. Good results. Tube fed at 7.30 p. m.

April 6, 1905. Awake and restless first part of last night. Refused medicine and nourishment. R, Hyoscine gr. 1/200 Morph. Sulph. grs. 1/6 at 2.30 a. m. Slept since 2.40 a. m. Very restless in her sleep Voided urine at 9.30 q's. Milk Ziss at 8.30 a. m.

April 7, 1905. R, beef juice Zii. Spts. Frumenti Zi. Normal Salt Sol. Zviii. Nutrient enema. (Retained very little of the above.) Beef juice Zi c. ice water Ziii q. $\frac{1}{2}$ hour. R, Strych. Sulph. gr. 1/ C. O. (Hypo) q. 4 hrs. 8-12-4-8. Bowels moved at 8 a. m.-9 a. m. Stool liquid. Died at 8.10 p. m., April 7, 1905.

Doctor CLARK. I would like to put in evidence the death certificate in the case of Sadie C. Wright.

The CHAIRMAN. Very well.

The certificate referred to is as follows:

9 p. m.

15239.

Copy of certificate of death.

[To be retained by physician.]

Date of death, April 7; name of deceased, Sadie C. Wright; sex, female; age, 44 years; color, white; single, widowed, widow; occupation, Government Printing Office; birth place, United States; duration of residence in District of Columbia, unknown; nativity of father, unknown; nativity of mother, unknown; place of death, cause of death. Agitated melancholia (two weeks) exophthalmic goitre; primary valvular disease of heart and chronic nephritis. Immediate; exhaustion from same; duration of last sickness, in bed since admission; date of entry, March 28, 1905; late residence, Washington, D. C.

REMARKS.

April 8, 1905. Removed by Frank Geier's Sons to 1113 Seventh street NW.

Mr. HAY. Have you anything to do with the autopsies out there?

Doctor CLARK. No; I have nothing to do with them except to notify the pathologist, in the event that I have a patient down there who has died. If the case is one of a patient who has friends, I will probably notify the pathologist of that fact, and we wait until we get their permission before an autopsy is held.

Mr. HAY. Who has charge of the autopsy?

Doctor CLARK. Dr. I. W. Blackburn does that work.

Mr. HAY. In this new position which has been created, from the description you give of the duties which you have to perform in it,

practically puts you in charge of the hospital so far as the clinical work is concerned?

Doctor CLARK. Yes; the medical part of the hospital.

Mr. HAY. That is entirely under your control?

Doctor CLARK. Yes, sir; it will be from now on. At least I am giving it a trial. I don't know whether I will be able to handle it or not, but I told the superintendent I would try it for a year and if I was not satisfactory he could drop me back into my old position or discharge me.

Mr. HAY. Then the superintendent does not discharge any of the duties you have described as being those intrusted to you?

Doctor CLARK. No; I am in there as his assistant, I imagine.

Mr. HAY. The only thing he has to do with that part of the hospital is to receive reports from you.

Doctor CLARK. I report things and then he looks them up and either takes my advice or we counsel together about the matter, and something will result from the consultation.

Mr. HAY. How often, while you were in charge of the female department, did Doctor White go through that department?

Doctor CLARK. He went through both the men's and the women's departments every Sunday morning in the acute psycho-pathic wards.

Mr. HAY. How often did the board of visitors go through the wards which were under your care, before you occupied the position you now have?

Doctor CLARK. I have seen the board of visitors there frequently. They met there monthly, semiannually and annually. The annual and semiannual meetings are meetings of the full board. The monthly meetings are just a committee of three. I imagine that one man will be on the committee of three about three or four times during the year, which will bring him to the institution three or four months in a year, and I generally saw them. Somebody is always there at the monthly meeting, or at least I saw somebody.

Mr. HAY. What do they do at these monthly meetings?

Doctor CLARK. They have an executive session and do a good deal of work there. They pass upon a great many recommendations.

Mr. HAY. How long do they stay on the grounds?

Doctor CLARK. The greater part of the afternoon.

Mr. HAY. They would not be able to go through that institution and make an inspection of it in an afternoon.

Doctor CLARK. It would be a physical impossibility for anybody to go through that institution in a day, and it would probably be impossible for them to do it in two days.

Mr. HAY. So that, so far as any inspection by the board of visitors is concerned, they have not been able to do anything?

Doctor CLARK. They only go through parts of the institution. They have one member of the board of visitors who visits the hospital on an average of twice a month. She is a very active member, and has to my knowledge visited all parts of the institution.

Mr. HAY. Has she any particular reason for going?

Doctor CLARK. Simply because it is one of her duties. She has a daughter in the institution, and she is very faithful in attending to her duties. She comes and wants to go through different parts each time. I think the last time she was there she went through the laundry department.

Mr. HAY. That reminds me that this note says you can testify as to the various patients who have been in the laundry. What about that?

Doctor CLARK. I can only say that when I was in charge of the woman's department we had quite a number of women who worked in the laundry. That is about all I know of the laundry patients.

Mr. HAY. In the management of an institution of this character do you not think there should be, in some department of it, some one charged with the inspection of all the various departments in the institution?

Doctor CLARK. I think that is the duty of the board of visitors—to inspect the hospital.

Mr. SMYSER. I take it that Mr. Hay has in mind just such an inspector as is provided for in the New York hospitals.

Mr. HAY. I do not know about that. What I had in mind was the general hospital in the Army. All the various departments of the Army, with which I happen to be more familiar than any other branch of the Government service, have inspectors who at any time may drop down and make a thorough inspection of the different departments under their control. Do you not think that for the proper conduct of an institution of this character some such inspection should be provided for by law?

Doctor CLARK. I think that would be a very good plan. I do not think that the superintendent or I would object to being inspected at any time.

Mr. HAY. It is not a question whether you would object or not. You have had experience in these matters, and the question is whether it would not be a good thing for the institution.

Doctor CLARK. It would be a good idea.

The CHAIRMAN. You speak of one member of the board of visitors who goes there twice a month. The board of visitors do not go to the hospital except at stated times?

Doctor CLARK. Yes; once a month. The first Tuesday in each month is visiting day.

Mr. HAY. And then there is only a committee visits the institution—three of the board?

Doctor CLARK. Three of the board.

The CHAIRMAN. Do they go in the summer time?

Doctor CLARK. Yes, sir; every month in the year.

Mr. HAY. How many members are there on this board?

Doctor CLARK. I think there are about eight members. We have a vacancy on the board now, I think.

Mr. SMYSER. The law provides for nine.

Mr. HAY. They are appointed by the President?

Mr. SMYSER. Yes, sir; the statute says that it is an honorary position, without pay.

Mr. BARCHFELD. Have you the record in the case of Cecelia J. Griffin?

Doctor CLARK. Yes, sir.

Mr. BARCHFELD. You may hand it to the stenographer, and it will be made a part of the record.

The record referred to is as follows:

GOVERNMENT HOSPITAL FOR THE INSANE.

SYNOPSIS OF RECORD.

Name, Cecelia J. Griffin. Case No. 14608. Date of admission, April 14, 1904; age, 66; social state, widow; diagnosis of mental disease on admission, agitated melancholia; supposed cause unknown; duration on admission, one month; admitted from District of Columbia; address of friends, post-office, Milton R. Griffin, 141 D street SE.

DEPARTMENT OF THE INTERIOR,
GOVERNMENT HOSPITAL FOR THE INSANE.

MEDICAL CERTIFICATE.

We certify that after a personal examination of the within-named person, we find her to be insane. The following is a history of the case as far as we have been able to obtain it:

Name, Mrs. Cecelia J. Griffin; age, 66; sex, female, widowed. Nativity, Maryland; education, common school; occupation, none; religion, Protestant; post-office address of friends, Milton R. Griffin, 141 D street SE., Washington, D. C. Robert W. Griffin, telegraph address, Kenwood avenue, Catonsville, Md.; Miss Nannie Griffin, 311 Q street NW. Telephone, N. 2205 M.

What relatives, including grandparents and cousins, have suffered from either of the following diseases: Insanity, epilepsy, chorea, hysteria, neurasthenia, tuberculosis? One sister (Augusta Hawkins).

Were parents addicted to excessive use of alcohol, opium, chloral, or other narcotics? No.

Habits of patients as to same. Strictly temperate.

Previous peculiarity of patient as to temper, conduct, etc. Normal.

Has patient had epilepsy, apoplexy, syphilis, tuberculosis, heat exhaustion, or other serious physical disease? No.

Evidence of sexual excess or abnormal sexual habits? No.

History of previous attacks, if any. None.

When and how did the first symptoms of the disease become manifest? Intense nervousness, gradually resulting in mania from March 15, 1904, to date, April 15, 1904.

Was there, previous to that date, any change in disposition, or evidence of physical or mental depression or disorder? No.

Describe as fully as possible the present symptoms of insanity: From ordinary nervousness a severe nervous irritation of the body developed, slowly hallucination begun to appear, and now she is not safe to be left alone.

What are the probable causes of the present attack, either predisposing or exciting? (No answer.)

Do suicidal or homicidal tendencies exist; if so, how manifested? To a slight extent by a desire to jump from the window.

In what institutions, if any, and when, has patient received treatment? None.

What special treatment has patient received during this attack? Only ordinary treatment.

QUESTIONS FOR FEMALES.

Number of children, 5; age of youngest, 27; number of miscarriages, none.

Has patient had any uterine or ovarian disease? No.

What menstrual irregularities, if any? None.

We hereby certify that the foregoing history is as complete as the opportunities at our command will permit.

Examining physicians or surgeons:

M. F. THOMPSON, M. D.,
Post-office address, 484 Maryland avenue SW.
G. W. WARREN, M. D.,
Post-office address, 1212 H street NE.

APRIL 14, 1904.

GOVERNMENT HOSPITAL FOR THE INSANE.

EXAMINATION OF URINE.

Case No. 14608; name C. Griffin; ward, Elm; date, March 11, 1905; analysis required, for indicamria.

Physical and chemical characters: Color, pale; odor, normal; reaction, acid; specific gravity, 1.020.

Normal constituents: Urine-indican, moderate amount. Abnormal constituents in solution: Albumen, absent.

Conclusion and diagnosis: Moderate indicamria.

CORNELIUS D. WEISS, M. D.,
Analyst.

GOVERNMENT HOSPITAL FOR THE INSANE.

PATHOLOGICAL DEPARTMENT.

Examination of sputum.

Case No. 14608; name, Cecelia J. Griffin; ward, Elm; date, May 16, 1904; analysis required, for tubercle bacilli.

General characteristics: Quantity received for examination, from gauze.

Anatomical constituents, etc.: Leucocytes, few; erythrocytes, absent; elastic tissue, absent; crystals, absent; foreign material, absent.

Parasites: Pathogenic. Tubercle bacilli, absent.

Conclusion and diagnosis: No evidence of tuberculosis.

CORNELIUS D. WEISS, M. D.,

GOVERNMENT HOSPITAL FOR THE INSANE.

EXAMINATION OF URINE.

Case No. —; name, C. Griffin; ward, Elm; date, April 20, 1904; analysis required, for records.

Physical and chemical characters: Color, yellow; odor, normal; reaction, acid; specific gravity, 1.020; quantity and character of the sediment, cloudy.

Abnormal constituents in solution: Albumin, present (trace); sugars, absent.

Microscopical examination: Crystals and amorphous deposits, calcium oxalate; casts, fragmented granulas; anatomical elements, etc., squamous cells.

Conclusion and diagnosis: There is evidence of chronic diffuse nephritis.

CORNELIUS D. WEISS, M. D.,
Analyst.

GOVERNMENT HOSPITAL FOR THE INSANE.

EXAMINATION OF URINE.

Case No. 14608; name, Cecelia J. Griffin; ward, East Side; date, October 31, 1904; analysis required, for record.

Physical and chemical characters: Quantity in twenty-four hours, not estimated; color, yellow; odor, normal; reaction, acid; specific gravity, 1.010; quantity and character of the sediment, clear.

Normal constituents: Urine-indican, moderate amount; urobilin, normal.

Abnormal constituents in solution: Albumin, absent.

Microscopical examination: Crystals and amorphous deposits, absent; casts, absent; anatomical elements, etc., mucus.

Conclusion and diagnosis: No evidence of disease.

CORNELIUS D. WEISS, M. D.,
Analyst.

GOVERNMENT HOSPITAL FOR THE INSANE.

Examination of urine.

Case No. 14608; name, Cecelia J. Griffin; ward, Elm; date, October 21, 1904; analysis required for records.

Physical and chemical characters: Quantity in twenty-four hours, not estimated; color, pale; odor, none; reaction, acid; specific gravity, 1.004; quantity and character of the sediment, clear.

Abnormal constituents in solution: Albumin, absent; sugars, absent; abnormal coloring matters, absent.

Microscopical examination: Crystals and amorphous deposits, absent; casts, absent; anatomical elements, etc., absent.

Conclusion and diagnosis: Urine very dilute. Total quantity in twenty-four hours would aid in the diagnosis.

CORNELIUS D. WEISS, M. D.,
Analyst.

GOVERNMENT HOSPITAL FOR THE INSANE.

WARD NOTES

Name, Cecelia J. Griffin; ward, Elm.

Case notes.

April 18, 1904: There is considerable clouding of consciousness. Apprehension is dulled and comprehends very little of her surroundings. Comprehends nearly all that is said to her. Memory for past events is very poor; for present events is very poor, principally on account of impressibility. Has delusions and probably hallucinations of hearing. Has been accused of murdering some one and some other people have been indicted with her and is fearful for them also. The whole content of thought seems to be made up of these self-accusations and delusions of a fearful character, which are very ill-defined and expressed incoherently. States at one time that she has committed murder and has been accused of it by others, and the next minute accuses herself of it. Coupled with this is an irritable condition and motor excitability. Rubs her face and even strikes herself, alternately takes her hair down and puts it up, runs about the room, jumps up and down, etc.

Her attention can not be held for any length of time, but long enough to give a short answer to questions. Is oriented partly for persons, time, and place, but is generally confused and it is only by making her think and holding her attention that she will answer questions at all. Is restless at night. Habits are tidy. Is indifferent as to place and takes no interest in anything about her.

Physical examination of lungs: Right side: Inspection. There is flatness of the chest wall over infraclavicular and mammary regions. On palpation a crepitation is felt over the second, third, and fourth ribs or costal cartilages at their junction with the sternum, which occurs at the beginning and during inspiration and at the end of expiration. This resembles the crepitus of a fractured rib. By pressure over the cartilages in this area crepitus is also elicited. Percussion denotes a uniform hyperresonance over this area, which is not tympanitic. On percussion the crepitus is also elicited. Auscultation, coarse bubbling rales and cavernous breathing heard over a considerable area anteriorly. Left side: Inspection reveals flattening similar to right side and a little more marked. On percussion over the upper lobe anteriorly is very hypersonant and more so than left side. Over apex of this lung are heard coarse raucous rales and lower is heard cavernous breathing. On the palpation over right lung anteriorly, about the junction of third and fourth ribs with sternum a distinct impulse is felt at the cartilages beginning of inspiration.

Cecilia J. Griffin.

Case No. 14608.

May 16, 1904: There has been no improvement in the patient's physical condition since her admission. She has a cough, with expectoration (see analysis of sputum). There was a moderate swelling, with some induration of the left parotid gland which rapidly subsided under treatment. Rests very poorly at night and hypnotics are administered each night. The fracture of the ribs that

was discovered shortly after admission has been treated by strapping the side with adhesive strips; this affords her much relief and she is free from pain to a great extent. Mentally there has been no change in her condition; she is extremely disturbed most of the time during the day and night; her delusions are of a subjective character and of a very painful nature; she frequently expresses herself that she is on fire and that she is burning up, etc. Her appetite is fairly good; bowels regular, and habits tidy.

June 15, 1904: There has been very little change in the mental and physical condition of the patient during the past month; she is extremely restless and disturbed most of the time; still requires hypnotics at night, and frequently medicine is administered during the day to afford her some relief; her delusions are of about the same character. Her appetite is fair and bowels regular; still coughs and expectorates a great deal.

July 30, 1904: The general health of patient is slightly improved; her breathing is better, and she does not cough and expectorate so much. Mentally there has been no particular change; she has intervals when she is very quiet and calm, but she is still subject to very disturbed attacks and becomes very noisy, walking the floor in a restless and aimless manner; she sleeps better, and hypnotics are not administered so often.

August 27, 1904: There is very little change in the physical and mental condition of the patient; she eats quite well, and bowels are regular. Mentally she is not quite so disturbed, but still has attacks when she becomes quite restless and noisy. She is sleeping much better at night, without the use of hypnotics.

September 22, 1904: Very little change in the general health and the mental condition of the patient. She is up and dressed each day, but becomes restless at times and quite excited; at night she occasionally requires a hypnotic. Her appetite is good, bowels regular, habits tidy.

October 28, 1904: There has been no change in the physical and mental condition of the patient.

November 15, 1904: General health remains about the same; patient coughs and expectorates a great deal; sputum has been examined the second time, and tubercular bacilli absent; her breathing is labored, and there are a great many moist râles in all parts of the lungs; condition is undoubtedly a chronic catarrhal bronchitis, with vesicular emphysema. Mentally there has been no change; she is restless and disturbed and has many delusions of a depressive nature.

December 30, 1904: There has been no particular change in the patient's physical condition; still has a cough, with expectoration, and upon physical examination of the lungs they are found to be in about the same condition as when last noted. She spends a portion of each day in bed. Her appetite continues good, her habits are tidy, and she is sleeping tolerably well without the use of hypnotics. At times she is subject to disturbed attacks of a depressive nature.

February 25, 1905: General physical health of patient remains unchanged, and there has been no particular change in her mental disease.

March 11, 1905: General health of patient fairly good; appetite good, and she rests tolerably well at night; for some little time past she has been having a distension of the abdomen, due in all probability to intestinal dyspepsia, with accumulation of flatus. When her abdomen becomes quite distended she seemingly gets more disturbed, and after the disappearance of the distension she generally quiets down. Examination of urine reveals a moderate amount of indicanuria. Mentally there is no particular change in her disease.

June 15, 1905: There has been no particular change in the patient's general health or her mental disease. She is subject at times to extension of the abdomen, and generally becomes more disturbed when this condition exists. Under active treatment we are able to relieve this distension. The condition of her lungs remains unchanged. She has frequent attacks of dyspnoea, with cough and expectoration. Mentally she is disturbed at intervals and becomes quite restless and noisy.

July 20, 1905: There is still some clouding of consciousness. Patient understands that she is not at her home, but does not comprehend the exact nature of this institution. Her memory for past events is fairly good, but there is no registration for recent events. Ideation is rapid and coherent. She answers intelligently simple questions, but her thoughts are principally subjective and of a painful nature; imagines that she has done some great wrong and fears evil will befall herself and her family.

Delusions of a self-accusatory character present; emotional state one of deep depression, with marked agitation; constantly when awake wandering around the ward; to some extent she is more quiet, and her noisy periods are not so frequent. The chronic bronchitis is a little better, and expectoration is not so profuse; breathing is also improved, and her heart's action is fairly good; bowels somewhat constipated, with distension of the abdomen; patient is probably more agitated when her abdomen is distended. She requires frequent purgatives; sleep is disturbed, and frequent doses of hypnotics are administered; appetite good; general health and strength has improved.

November 25, 1905: There has been no particular change in the general health and mental condition of the patient since last note. Her appetite is fair, and she rests fairly well at night; her delusions of late have changed a little, and she frequently becomes very restless and disturbed over such things as that the building is going to fall down and that the ceiling of her room is going to cave in on her, etc.

January 18, 1906: On the morning of the 17th of January, at 5.30, the patient was permitted to leave her room by the nurse. After waking up she became quite restless, and the nurse dressed her and permitted her to walk in the main dormitory, which has been a custom for some time. The patient generally becomes quiet when she has more liberty. On this particular morning she followed the nurse into the dormitory, and stood for a few minutes at the radiator, and then turned to return to her room. In doing so she fell and received a fracture of the right femur near the hip joint. She was placed in bed. The visiting surgeon, J. Ford Thompson, saw the case in consultation with Doctor Hough, and recommended that she simply be kept in bed without the application of any dressing.

April 13, 1906: The patient has been confined to her bed since receiving the fracture, and the greater part of the time she is fairly quiet and easily controlled. A special nurse was detailed to take care of her, and she is never alone during the twenty-four hours. At the end of six weeks the patient was able to move her injured limb, and she seemed to be entirely free from pain. She is also able to sit up a portion of the day in a rocking chair. There undoubtedly has been some union with very little shortening, but we have never permitted the patient to stand or attempt to walk on her injured limb. There has been no marked improvement in her chronic bronchitis, and still has cough with expectoration and difficult breathing. Her appetite is fairly good, but she requires frequent hypnotics at night to give her rest. Mentally there has been no marked change; she is still depressed, and her ideas are of a painful nature and cause her considerable agitation and worry.

GOVERNMENT HOSPITAL FOR THE INSANE.

WARD NOTES.

Name, Mrs. Griffin; ward, Elm; date of entry, April 14, 1904.

CASE NOTES.

April 14, 1904: Patient admitted to ward about 3 p. m. Somewhat excited and disturbed. Did not want daughters to leave her. Bathed, person and clothing clean and in good condition; feet blistered and corns on toes. Put to bed. Restless and disturbed for short while. Eat very good supper. Coughs and expectorates some. Excited and disturbed at intervals. R. Sig. Potas. Brnni Zii. Liq. Chlo. Hydt. Zii. Refused to take med.

April 15, 1904: Quiet and slept very well during night. Bowels moved once. Excited and restless this a. m., slapping hands and face. Very much excited and disturbed while daughters were in.

April 16, 1904: Patient very much disturbed during first part night. Quiet after 9 p. m. until mdt. R. Hyosceine Hydrobrum gr. 1/100 at 12.40 a. m. Egg-nog at 3 a. m. Slept about 2 hours; took nourishment very well. Bowels moved twice; normal stool. Quiet this a. m., remaining in bed fairly well. Habits tidy. Bowels regular. Appetite fairly good. Imagines some one on roof. Talks great deal about jail. Quiet and remained in bed most of day.

April 17, 1904: Disturbed first part of night. Refused trional powder. R,

Hyoscine Hydrobrum, gr. 1/100 hypo at 12.40 a. m. Quiet, but slept very little. Quiet this a. m.

April 18, 1904: Patient disturbed first portion of night. Morphia sulph. gr. 1/6. Hyoscine Hydrobrum gr. 1/100 hypo at 10 p. m. Slept from 10.45 p. m. until 4 a. m.; awake since. Excited and disturbed at intervals since. Refused nourishment. Bowels moved. Very much disturbed and restless during p. m. Hyoscine Hydrobrum gr. 1/100 at 7 p. m.

April 19, 1904: Slept well until 3.30 p. m. Disturbed and noisy at intervals since. Locked in single room knocking bed against door. Took nourishment.

April 20, 1904: Patient awake and very much disturbed at mdt. Trional powder grs. xx at 12.35. Slept about 2 hours. Very much disturbed this a. m. Noisy at intervals. Takes nourishment very well. Very much disturbed at intervals; noisy and restless. Bowels moved; natural stool.

April 21, 1904: Awake first portion of night. R, Trional powder grs. xo at 11 p. m. Slept about four hrs. Disturbed 3.30. R. Elixir Ammon. sval Zss at 4 a. m. Quiet this a. m. Took nourishment very well. Would not remain in bed. Restrained in bed with sheets.

April 22, 1904: Awake and disturbed until 9.30 p. m. Hyoscine Hydrobrum gr. 1/100 morphia sulph. gr. 1/6 (hypo) at 9.15 p. m. Restrained in bed with sheets. Slept well until 3 a. m. Disturbed and noisy at intervals since. Complaints of not being able to swallow. Continues noisy and disturbed at intervals. R, Liq. Potas. Bromi. Liq. Chlo. Hydt. a a zii at 7.30 p. m. Awake but quiet first portion of night. Slept about three hrs. Quiet this a. m. Some swelling about left ear. Painted c. iodine.

April 23, 1904: Remaining in bed fairly well this a. m. Takes nourishment well.

April 25, 1904: Awake and somewhat disturbed first part of night. R, Trional grs. xx at 12.33 a. m. Quiet and slept about 5 hours. Restraint removed this a. m. Seems very stupid. Sleeping greater portion of time. Bowels moved. Constipated stool. Swelling about right ear. Painted ear c. sol. collodion ichthyol p. r. m. Eggnog q few hrs.

April 26, 1904: Seems very comfortable this a. m. though weak. Face more swollen this a. m. Slept well during night.

April 27, 1904: Milk zvi. whisky Z ss. q. 4 hrs.

April 28, 1904: Quiet and slept well during night without restraint. Habits tidy. Bowels reg. Appetite improving.

April 30, 1904: Disturbed and restless at intervals. restraint necessary frequently. Habits tidy. Bowels regular. Appetite fairly good. Slept well. Most of swelling disappeared from face. Special diet.

May 1, 1904: Awake and noisy at times first portion of night. Trional grs. x v at 11 p. m. Milk c whisky Z ss. at 11 p. m. Liq Potas Bromi Z ii. Liq chlo hydt Z ii at 1 a. m. Slept about 5 hrs. Noisy and disturbed at intervals during day. Takes nourishment fairly well. Bowels regular. Void urine qs. Took nourishment fairly well.

May 2, 1904: Slept well during night. Took nourishment well. Somewhat disturbed this a. m. for short while. Special diet.

May 4, 1904: Patient quiet and seems comfortable this a. m. Bowels move regularly every day. Appetite fairly good. Habits tidy. Strait sheet on p. r. n.

May 6, 1904: Disturbed at intervals. Noisy. Slept fairly well. Became restless and would not stay in bed at 2 a. m. Restrained in sheet. R, Liq Chloral Hydrate. Liq Potas Bromi aa Z ii M. Slept fairly well since.

May 8, 1904: General condition continues about the same. Noisy and restless at times. Bowels regular every day. Habits usually tidy. Sleeps fairly well. Strait sheet on p. r. n. Special diet.

May 9, 1904: Patient seems very much disturbed. Restrained in sheet. Bowels regular.

May 10, 1904: Continues about the same, very restless at times and noisy. Trional Powder grs. x at 12.30 a. m.

May 12, 1904: Continues noisy and disturbed at intervals.

May 15, 1904: Patient very restless during day; restrained and medicine during night. Bowels reg. Appetite very good.

May 18, 1904: General treatment. Restrained in rest sheet p. r. n. Special diet. Very noisy about 10.30 p. m. Sol. Bromi potas zii. Sol. chlo. hydt. zii at 10.30 p. m. Quiet until 12 mdt. Very restless and noisy since. Hyoscine hydrobrum gr. 1/100. Morphia sulph. gr 1/6 M hypo 1.45 a. m. Slept well since. Stupid this a. m. Bowels move daily. Appetite fairly good. Habits tidy.

May 21, 1904: Patient continues noisy & disturbed at intervals; restrained in rest sheet p. r. n. Slept fairly well during night. Bowels regular. Habits usually tidy. Appetite fairly good. Complaints of shortness of breath & throat being sore. Imagines she is going to be burned all time.

May 24, 1904: Patient very much disturbed & restless early portion of night. Restrained in sheet. Hyoscine Hydrobrum gr. 1/100 Morph. Sulph. gr. 1/6 hypo. Quiet and slept well since, up and dressed to-day. Somewhat restless & disturbed. Complaints of shortness of breath.

May 25, 1904: Patient very restless & much disturbed this a. m. Slept well during night. Appetite fairly good. Habits tidy. Very much disturbed during day.

May 26, 1904: Liq. Potas Bromi Zii at 4 p. m. Trional powder grs xx at 7 p. m. Liq. potas bromi zii. Sol. chlo. hydrt. zii at 11.30 p. m. Continues disturbed this a. m.

May 29, 1904: Patient continues very much disturbed & noisy at times. Liq. potas bromi zii. Liq. chlo. hydrt. zii. at 11 p. m. Slept fairly well since. Out on lawn good days. Very restless greater portion of time. Bowels regular. Habits somewhat untidy. Appetite poor.

May 31, 1904: Patient very noisy and much disturbed during p. m. Hyoscine hydrobrum gr. 1/100 hypo. at 7.45 p. m. Quiet and slept well since 8.30 until 5 a. m. Up this a. m., somewhat disturbed.

June 1, 1904: Patient very noisy and disturbed during early portion of night. Hyoscine hydrobrum gr. 1/100. Morph. sulph. gr. 1/6 hypo. at 10 p. m. Put in restraining sheet at 3 a. m. Slept fairly well since 11 p. m. Restless and disturbed this a. m. Hyoscine hydrobrum gr. 1/100. Morph. sulph. gr. 1/6 (hypo) at 8 p. m.

June 2, 1904: Patient slept fairly well during night. Fairly quiet this a. m. Appetite poor. Imagines she is burning all time. Bowels regular. Habits fairly tidy. Special diet.

June 3, 1904: Trional powder grs. xx at 7.30 p. m. Quiet & slept well during night. Somewhat disturbed & noisy this a. m. Habits tidy. Bowels regular. Appetite poor.

June 7, 1904: Very much disturbed and excited early portion of night. Hyoscine hydrobrum gr. 1/100. Morph. sulph. gr. 1/6 hypo. at 9 p. m. Slept fairly well since 9 p. m. Somewhat disturbed and restless this a. m. Appetite poor. Bowels regular.

June 8, 1904: Disturbed & noisy at intervals; seems very much excited. Morphia sulph. gr. 1/6. Hyoscine hydrobrum gr. 1/100 (hypo) at 8.30 p. m.

June 9, 1904: Quiet & slept fairly well. Habits tidy. Noisy at intervals. Bowels regular.

June 10, 1904: Hyoscine gr. 1/100 at 10 a. m. Quiet since.

June 11, 1904: Noisy and disturbed this a. m. Very restless.

June 12, 1904: Patient very much disturbed about noon. Hyoscine hydrobrum gr. 1/100. Morphia sulph. gr. 1/6 (hypo) at 1.30 p. m. Quiet since 2 p. m. until 8 p. m. Very much disturbed. Same dose repeated at 9 p. m.

June 13, 1904: Quiet and slept well since 9.30 p. m. Somewhat disturbed this a. m. at intervals. Eggnog with whisky zss at 10-3.

June 15, 1904: Patient continues noisy at intervals. Slept well during night. Quiet this a. m.

June 19, 1904: Patient continues very noisy at times. General condition remains about the same. Bowels regular. Habits untidy. Slept fairly well during night. Appetite very good.

June 22, 1904: Patient very much disturbed. Noisy and restless, beating head with hands. Hyoscine hydrobrum gr. 1/100. Morphia sulph. gr. 1/6; hypo at 2 p. m. Eggnog at 3 p. m. Quiet since 3.30 p. m. Bowels moved several times, semisolid stools.

June 23, 1904: Quiet and slept well during night. Bowels did not move.

June 27, 1904: General treatment—Eggnog q. 4 hours 7-11-3. Special diet. Very restless and disturbed at intervals. Liq potas bromi zii el ammon, sval zi q. 3 hours if disturbed, 10-2-4-8. Bowels moved.

June 28, 1904: Noisy and disturbed east part of night. Would not remain in bed. R. (hypo) at 9.45 p. m. Slept very well since; quiet this a. m.

June 29, 1904: Quiet greater portion of day. Bowels moved.

June 30, 1904: Slept fairly well. Takes nourishment very well. Expecto- rates on floor. Habits untidy. Appetite fairly good.

July 3, 1904: General treatment—Liq potas bromi zii. el ammon sva 1 zi q.

3 hours if disturbed. Special diet. Eggnog q. 4 hours. Quiet and comfortable greater portion of day. Slept well. Takes nourishment fairly well. Remains in bed very well.

July 6, 1904: Quiet but did not sleep very well. Did not take nourishment as well as usual. Bowels somewhat constipated. Habits untidy. Expecto- rates on floor. Voids urine large quantities.

July 8, 1904. Quiet and slept well all night. Bowels regular. Habits un- tidy. Appetite poor.

July 10, 1904: General treatment—Strychnia sulph. gr. 1/6 per mouth q. 4 hours, 8-12-4. Eggnog with whisky zss at 11-3. Noisy and disturbed from 8 until 10 p. m. Hyoscine hydrobrium gr. 1/100. Morphia sulph. gr. 1/6 (hypo) at 10 p. m. Slept very well since. Quiet this a. m. Bowels constipated. Appetite poor. Habits tidy.

July 11, 1904: Quiet and slept well all night. Seems very comfortable. Eat good breakfast. Takes medicine very well. Habits tidy.

July 13, 1904: General treatment—Strych. sulph. gr. 1/60 per mouth at 8-12-4. Eggnog at 11-3. Light diet. Condition of patient continues about the same. Noisy at times. Bowels regular. Habits tidy. Sleeps fairly well. Very much disturbed about 7.30. Hyoscine hydrobrium gr. 1/100 hypo at 8 p. m. and 10.30 p. m. Quiet after second dose and slept fairly well. Bowels moved at 7.30 a. m. Normal stool. Appetite fairly good. Somewhat excited this a. m.

July 16, 1904: Condition of patient continues about the same. Noisy and excited at intervals. Bowels regular.

July 18, 1904: General treatment—Strich. sulph. gr. 1/60 per mouth q. 4 hrs., 8-12-14. Special diet. Eggnog at 11-3. Noisy and excited early portion of night. Hyoscine hydrobrium gr. 1/100, morphia sulph. gr. 1/8 (hypo.) at 11.45 p. m. Slept well since midnight. Noisy since 6 a. m. Habits tidy. Bowels regular. Appetite fairly good.

July 21, 1904: Continues noisy at intervals. Slept very well. Appetite fairly good. Expectorates on floor. Untidy at times. Very restless during day. Bowels regular.

July 23, 1904: General treatment—Strych. sulph. gr. 1/60 per mouth q. 4 hrs., 8-12-4. Special diet. Patient slept well. Quiet greater portion of day; some- what excited and restless at times. Bowels moved semisolid stool. Appetite fairly good.

July 25, 1904: Bowels moved liquid stools. R, oleum ricini, ziii; spts. fru- menti, zss; pep. milk water, zss at 7 a. m. Sig., one dose. Slept fairly well during night.

July 26, 1904: Disturbed and noisy at intervals during day. Liq. potas. bromi. zii, el. ammon. val. zi at 3 p. m. Quiet since.

July 27, 1904: Strych. sulph. gr. 1/60 per mouth at 8-12-4-8. Eggnog at 11-3. Special diet. Quiet and slept well. Bowels moved, soft formed. Noisy at intervals during day.

July 29, 1904: Patient continues noisy and disturbed at intervals. Appetite usually very good. Habits untidy. Bowels normal. Slept fairly well during night. Out walking for short while.

July 31, 1904: Noisy for short while this a. m. Slept well during night.

August 2, 1904: General treatment—Strych. sulph. gr. 1/60 per mouth q. 4 hrs., 8-12-4. Special diet. Very noisy early portion of night, pounding on door and ground. Hyoscine hydrobrium gr. 1/100 (hypo.) at 10 p. m. Slept about three hours during night; restless and noisy at intervals since bowels moved; constipated stool.

August 3, 1904: Somewhat disturbed at intervals during day. Bowels moved; constipated stool.

August 4, 1904: Patient quiet and slept well. Quiet this a. m. Eat very good breakfast.

August 6, 1904: General treatment—Strych. sulph. gr. 1/60 per mouth at 8-12-4. Eggnog at 11-3. Special diet. Slept fairly well. Up this a. m. somewhat disturbed. Liq. potas. bromi. zii at 7 p. m. Bowels regular.

August 8, 1904: Bowels moved twice; diarrhea character. Somewhat dis- turbed this a. m. and noisy. Habits untidy. Appetite fairly good.

August 9, 1904: Patient on lawn in a. m.; very much disturbed about 1 p. m. Liq. potas. bromi. zii at 2 p. m. R, hyoscine hydrobrium gr. 1/100 (hypo.) at 2.30 p. m. Quiet since 2.50 p. m.

August 10, 1904: General treatment—Strych. sulph. gr. 1/60 per mouth at 8-12-4. Eggnog at 11-3-7. Special diet. Liq. potas. bromi zii at 8.30 p. m.

Slept very well and quiet all night. Wakeful and restless this a. m. Very much disturbed since 11 a. m. R, medicine at 2.30 p. m. Two doses of R bromi mixt. Ziii. R, hyoscine, gr. 1/100 hypo. at 5 p. m. Quiet since 6.30 p. m.

August 12, 1904: General treatment—Strych. sulph., gr. 1/60 per mouth q 4 hrs., 8-12-4. R. bromi mixt. Ziii t. i. d. eggnog q 4 hours 11-3-7. Special diet. Quiet and slept well during night. Awaked for medicine and nourishment. Somewhat noisy this a. m. at intervals.

August 14, 1904: Patient quiet greater portion of day. Slept well during night. Patient noisy at intervals during a. m. Bowels have not moved. Appetite fairly good. Slept well.

August 17, 1904: General treatment—Strych. sulph., gr. 1/60 q 4 hrs., 8-12-4. Eggnog at 11-3-7. Special diet. Side rubbed with R Sol. frequently. Patient quiet and slept well all night. Seems very comfortable this a. m. Takes nourishment fairly well.

August 19, 1904: Fairly quiet and slept well. Takes nourishment fairly well. Bowels constipated. Habits untidy.

August 20, 1904: Bowels moved; semisolid stool. Slept well. Quiet this a. m.; restless during p. m.

August 21, 1904: Quiet and slept well during night. Remained in bed very well.

August 24, 1904: General treatment—R. bromi mixt. Zii A. C. strych. sulph., gr. 1/60 per mouth q 4 hrs., 8-12-4. Eggnog at 11-3-7. Special diet. Side rubbed with R, liniment. General condition continues about the same. Disturbed and restless at intervals; noisy at times; bowels somewhat constipated. Expectorates great deal. Appetite fairly good.

August 26, 1904: Patient quiet and slept well during night. Bowels constipated. Appetite very good. Habits untidy at times. Restless and noisy at intervals during day. General treatment: Strych. sulph., gr. 1/60 per mouth q 4 hrs., 8-12-4. Eggnog at 11-3-7. Special diet.

August 27, 1904: Patient quiet and slept well during night. Somewhat restless and noisy during day.

August 30, 1904: Somewhat restless last few days. Cries at times. Sleeps well. Bowels constipated. Appetite very good. Habits untidy.

September 1, 1904: Patient spits up food after meals. Bowels regular. Restless and noisy at intervals. Appetite fairly good. Slept very well.

September 3, 1904: Somewhat restless at times until 10 p. m. Quiet and slept about 3½ hours since. Quiet this a. m.

September 4, 1904: General treatment—Strych. sulph., gr. 1/60 per mouth q 4 hrs., 8-12-4. Eggnog q 4 hrs., 11-3-7. Special diet. Patient quiet and slept fairly well during night. Bowels moved.

September 7, 1904: Condition of patient remains about the same. Up greater portion of day. Quiet and sleeps fairly well. Bowels regular. Appetite fairly good.

September 9, 1904: Patient up greater portion of day. Somewhat disturbed at intervals and noisy. Slept well. Habits untidy at times. Bowels regular.

September 11, 1904: Condition somewhat improved. Out for short walk daily. Bowels constipated.

September 13, 1904: General treatment—R. bromi. mixt. Zii A. C. strych. sulph. gr. 1/60 per mouth, at 8-12-4. Eggnog at 11-3-7. Special diet. General condition somewhat improved. More quiet. Up greater portion of day. Appetite fairly good.

September 16, 1904: Patient quiet and slept well during night.

September 22, 1904: Generally very little change in condition. Up and dressed each day. Restless at times. Sometimes excited and noisy for short while. Treatment as usual. Bowels constipated. Appetite very good.

September 25, 1904: General treatment—R, medicine Zii A. C. R. powder P. C. strych. sulph. gr. 1/60 per mouth at 8-12-4. Eggnog at 7-11-3. Special diet. Patient remained in bed greater portion of day. Slept well during night. Bowels moved. Soft formed stool. Seems very comfortable.

September 27, 1904: Patient restless early portion of night. R, trional grs. X at 11 p. m. Quiet and slept well rest of night. Seemed somewhat stupid during day.

September 28, 1904: Patient up this a. m. Somewhat restless. Fairly quiet. Appetite fairly good. Bowels reg. Habits tidy.

September 30, 1904: General treatment—Strych. sulph. gr. 1/60 per mouth at 12-4-8. Eggnog at 11-3-7. R, bromi. mixt. Zss A. C. Special diet. Patient

quiet and slept fairly well. Physically somewhat improved. Appetite fairly good. Habits tidy. Bowels regular.

October 3, 1904: Patient's general condition remains about the same. Worries at times about imaginary things. Up greater portion of each day. Appetite fairly good. Bowels regular. Habits usually tidy. Slept fairly well. Expectorates good deal. Seldom coughs.

October 6, 1904: General treatment—Strych. sulph. gr. 1/60 per mouth q. 4 hrs., 8-12-4. Eggnog at 11-3-7. R, bromi. mixt. Zii A. C. Special diet. General condition of patient fairly good. Bowels regular. Appetite fairly good. Sleeps very well.

October 8, 1904: Condition remains about the same, generally. Up greater portion of day. Sleeps fairly well. Bowels regular. Imagines she has killed some one.

October 13, 1904: Patient somewhat disturbed at intervals during day. Sleeps fairly at night. Habits tidy. Bowels regular.

October 16, 1904: General treatment—Strych. sulph. gr. 1/60 per mouth q. 4 hrs. 8-12-4. R, bromi. mixt. Zii A. C. Eggnog q. 4 hrs. 7-11-3. Special diet. General condition continues very good. Bowels slightly constipated. Habits tidy. Appetite fairly good. Quiet and sleeps well usually. Somewhat disturbed at times during day. Expectorates great deal.

October 18, 1904: No change in condition. Abdomen somewhat distended. Bowels slightly constipated. Sleeps fairly well. Disturbed at intervals.

October 21, 1904: General treatment.—Strych. sulph. gr. 1/60 per mouth q. 4 hrs. 8-12-4. R Bromi. mixt. Zii A. C. Eggnog at 11-3. Special diet. Patient very much disturbed greater portion of yesterday and noisy. Slept fairly well. Void urine in large quantities. Appetite fairly good. Bowels regular. Habits tidy usually. Catheterized at 10 a. m. Somewhat disturbed this a. m.

October 23, 1904: Disturbed and restless greater portion of day. Liq. Potas. Bromi. Ziss. El. Ammon sval. Zi at 10 a. m. and 1 p. m.

October 24, 1904: General treatment.—Strych. sulph. gr. 1/60 per mouth at 8-12-4. Eggnog at 11-3. Special diet. Somewhat disturbed this a. m. Noisy at times. Bowels moved. Slightly constipated. Voids urine abnormally.

October 28, 1904: Patient disturbed greater portion of day. Sleeps fairly well usually. Bowels regular. Appetite fairly good.

November 1, 1904: Condition about the same. Disturbed more or less all the time. Slept very well during night. Habits tidy. Bowels regular. Soft formed stool.

November 4, 1904: General treatment.—Strych. sulph. gr. 1/60 per mouth at 12-4. Eggnog at 11-3-7. Special diet. R Bromi. mixt. Zii. A. C. R Powd. P. C. Bowels moved, slightly formed stool. Voids urine large quantities at times. Slept fairly well. Disturbed greater portion of day. Appetite fairly good.

November 6, 1904: Continues restless during day. Sleeps fairly well at night. Appetite fairly good. Bowels constipated.

November 10, 1904: Coughed and expectorated good deal a few days. Quiet and slept well. Appetite fairly good. Bowels constipated.

November 14, 1904: General treatment.—Strych. sulph. gr. 1/60 per mouth at 8-12-4. R. Cough mixt. Zii. q. 3 hrs., 8-11-2-5. Eggnog at 11-3-7. Special diet. Breathing with difficulty, propped up in bed. R, Medicine given inhalation at 10, 11.30, 12.45, 1.50, 3.30, a. m. R Morphia sulph. gr. 1/120 per mouth at 3.40 a. m. Chest rubbed with R liniment q. few hours. Coughed considerable at intervals. Slept fairly well since 4 a. m. Quiet and sleeping this a. m. Seems fairly comfortable this a. m.

November 15, 1904: General treatment.—Strych. sulph. gr. 1/60 per mouth q. 4 hrs. 8-12-4. R, Cough mixt. Zi q 3 hrs., 9-12-3-6. R, inhalations q. few hrs. Eggnog at 11-3-7. Chest rubbed with R liniment frequently. Special diet. Quiet and slept well, expectorating great deal. Coughs at intervals. Bowels have not moved. Takes med. and nourishment fairly well. Somewhat excited at times after 3 p. m. Slept fairly well since 10.30 p. m. Refused treatment during p. m. Became very much excited.

November 16, 1904: Quiet and asleep greater portion of a. m. Bowels constipated. Appetite fairly good.

November 18, 1904: General treatment.—R, cough mixt. Zi q 3 hrs. 9-12-3-6. Strych. sulph. gr. 1/60 per mouth q. hrs., 8-12-4. R Bromi mixt. Ziii A. C. Eggnog at 11-3-7. Special diet.

Patient up greater portion of day. Slept very well. Coughs and expectorates great deal. Bowels constipated. Restless at times.

November 30, 1904: Patient very restless and excited at times and noisy. Bowels constipated. Eat very good breakfast. Expectorates great deal. Very much excited last eve. R. trional, grs. XX a 7 p. m. Continued noisy and disturbed until 11 p. m. R. medicine at 11 p. m. Slept fairly well since; quiet this a. m.

November 30, 1904: General treatment.—R. Cough mixt. Zi q 3 hrs., 9-12-3-6. Strych. sulph., gr. 1/60 per mouth at 8-12-4. Liq. potas. bromi. Zii A. C. Eggnog at 11-3-7. Special diet. Somewhat excited this a. m. Bowels moved. Appetite fairly good usually.

December 1, 1904: Very much disturbed early portion of night. R. medicine at 9.30 p. m. Slept well since. Quiet this a. m. Eat very good breakfast.

December 6, 1904: Physically patient does not seem so strong. Remains in bed greater portion of time. Bowels regular; appetite very good. Takes nourishment very well.

December 9, 1904: General treatment.—R. cough mixt. Zi q 3 hrs., 9-12-3-6. Strych. sulph., gr. 1/60 per mouth at 8-12-4. Eggnog 11-3-7. Special diet. Physically patient seems stronger. Up and around part of time. Bowels reg.; quiet and slept well. Appetite very good.

December 12, 1904: Condition very good for several days. Generally somewhat disturbed for short while at intervals. Remains in room greater portion of time. Bowels regular. Appetite very good. Sleeps very well.

December 14, 1904: General treatment.—Strych. sulph., gr. 1/60 per mouth at 8-12-4. R. cough mixt. Zi q 3 hrs. 9-12-3-6. Eggnog at 11-3-7. Special diet. Physically patient improved. Mentally disturbed at times. Sleeps fairly well usually. Bowels regular. Appetite very good. Takes nourishment and med. very well. Habits tidy.

December 16, 1904: Patient slept well. Bowels constipated. Remains in bed greater portion of time. Disturbed at intervals. Appetite fairly good. Habits untidy at times.

December 22, 1904: General treatment.—R. cough mixt., Zi q 3 hrs., 9-12-3-6. Eggnog at 11-3-7. Strych. sulph., gr. 1/60 per mouth at 8-12-4. Special diet.

Patient remains quietly in bed for past few days. Sleeps great deal. Seems very comfortable. Expectorates great deal. Bowels somewhat constipated. Appetite fairly good.

December 27, 1904: Bowels moved several times after dose cascara mixt. Disturbed for short while at intervals. Appetite fairly good. Habits untidy.

December 31, 1904: General treatment.—Strych. sulph., gr. 1/60 q. 4 hrs. per mouth, 8-12-4. Eggnog at 11-3-7. R. cough mixt., Zi 9-12-3-6. R. powder P. C. Liq. potas. bromi. Zii A. C. Somewhat restless and disturbed past two days. Bowels moved several times; soft-formed stools. Appetite very good. Habits untidy. Slept well.

January 3, 1905: Patient noisy and restless greater portion of time. Bowels regular. Slept fairly well. Appetite fairly good.

January 6, 1905: Patient somewhat disturbed past few days at intervals.

January 9, 1905: General treatment—Strych. sulph. gr. 1/60 per mouth, q 4 hours, 8, 12, 4. Eggnog at 11, 3, 7. R cough mixt. q 3 hours, 9, 12, 3, 6. R bromi potas sol Zii A. C. Special diet. Patient restless and slept very little. Appetite very good. Bowels moved.

January 11, 1905: Mentally somewhat disturbed and restless. Bowels regular. Habits untidy. Slept fairly well during night. Appetite fairly good.

January 12, 1905: Very much disturbed during day; walking around.

January 13, 1905: General treatment—Strych. sulph. gr. 1/60 per mouth at 12, 4, 8. R cough mixt. Zi 9, 12, 3, 6. Eggnog at 11, 3. Special diet. Liq potas Bromi Zii A. C. Patient disturbed and noisy this a. m. Liq. potas bromi Zii at 10 a. m.

January 16, 1905: Patient has cold. Coughs and expectorates great deal; somewhat disturbed and restless during p. m. Bowels moved.

January 17, 1905: Quiet and slept very well during night. Quiet this a. m. Temp. normal.

January 19, 1905: Restless during night. Bowels moved.

January 20, 1905: General treatment—Strych. sulph. gr. 1/60 q 4 hrs., 8, 12, 4. Eggnog at 11, 3, 7. R cough mixt. Zi q 3 hrs., 9, 12, 3, 6. Special diet. Patient quiet and slept well during night. Bowels moved. Liquid stool. Seems stupid this a. m. Did not eat any breakfast.

January 21, 1905: Disturbed early portion of night. Trional grs. Xv with hot whisky punch at 9.30 p. m. Slept well since 10 p. m. Quiet and seemed stupid during day. Atrophine sulph. gr. 1/12 q. 4 hrs, 8, 12, 4, per mouth.

January 25, 1905: General treatment—Strych. sulph. gr. 1/60 per mouth at 8, 12, 4. Eggnog at 11, 3, 7. R cough mixt. Zi at 9, 12, 3, 6. Liq potas. bromi Zii A. C. Special diet.

January 27, 1905: Patient restless last eve for short while. Quiet and slept all night. Appetite very good. Habits tidy. Coughs at times. Expectorates great deal.

January 28, 1905: Patient slept well. Somewhat restless during day. Expectorates great deal. Appetite fairly good. Bowels regular.

January 31, 1905: Patient disturbed for while early part of night. Slept fairly well later portion. General treatment—Eggnog with whisky Zss at 11, 3, 7. R cough mixt. Zi 9, 12, 3, 6.

February 4, 1905: Strych. sulph. gr. 1/60 per mouth at 8, 12, 4. Special diet. R powder A. C. Patient slept well. Bowels regular. Expectorates great deal and coughs. Appetite fairly good.

February 6, 1905: Bowels moved; soft formed stool. Quiet and slept well. Coughed at intervals.

February 9, 1905: Bowels moved several times; semiliquid stools. R diarrhoea mixt. q few hours.

February 10, 1905: Slept fairly well. Quiet this a. m. Bowels moved once.

February 15, 1905: General treatment—R Hydriodic acid Zi q 3 hrs., 9, 12, 3, 6. Eggnog at 11, 3. Strych. sulph. gr. 1-60 per mouth at 8, 12, 4. Special diet. Coughs at intervals. Bowels regular. Restless and disturbed at times. Appetite fairly good. Expectorates freely. Slept very well during night.

February 18, 1905: Condition remains unchanged. Inhalations of R Benzozate and creosote q few hrs.

February 22, 1905: General treatment—Strych. sulph. gr. 1-60 per mouth at 8, 12, 4. H. Hydriodic acid Zi q 3 hrs., 9, 12, 3, 6. Eggnog q 4 hrs., 11, 3, 7. Special diet. Patient restless past few days, walking great deal. Noisy at times. Appetite fairly good. Bowels somewhat constipated. Slept fairly well.

February 25, 1905: Patient slept well during night. Restless during day. Somewhat disturbed. Habits untidy. Expectorates great deal. Bowels constipated. Appetite fairly good.

February 26, 1905: Wakeful first part of night. Slept well since 11 p. m. Quiet this a. m.

March 2, 1905: General treatment—R Hydriodic acid Zi q 3 hrs., 9, 12, 3, 6. Strych. Sulph. gr. 1-60 q 4 hrs., 8, 12, 4. Eggnog with whisky Zss at 11, 3, 7. Special diet. Patient disturbed at times. Bowels moved. Habits untidy. Appetite fairly good. Slept well during night. Cough and expectorates great deal.

March 6, 1905: Patient restless greater portion of day. Quiet and slept well past few nights. Bowels constipated. Appetite fairly good. Patient restless early portion of night. Trional at 9.30 p. m.

March 7, 1905: General treatment—R, Hydriodic acid Zi q 3 hrs., 9, 12, 3, 6. Strych. sulph. gr. 1-60 per mouth at 8, 12, 4. Eggnog at 11, 3, 7, with whisky Zss. Special diet. Slept very well latter portion of night. Very much excited and noisy this a. m. Liq. Potas. Bromi. Zii at 10 a. m. and noon. Continued very much disturbed and noisy and restless. Trional grs. X at 2 p. m. More quiet but still restless and excited. Asleep since 3.30 p. m. Awake and disturbed at 7 p. m. Tr. Opil Camp. Ziss at 7 p. m.

March 8, 1905: General treatment—R Hydriodic acid Zi q 3 hrs., 9, 12, 3, 6. Strych. sulph. gr. 1-60 per mouth q 4 hrs. 8, 12, 4. Eggnog with whisky Zss at 11 3, 7. Special diet. Slept well until 4 a. m. Noisy short while. Quiet and sleeping greater portion of time this a. m. Bowels moved; natural stool. Took nourishment very well.

March 9, 1905: Patient restless at times during day.

March 11, 1905: Quiet and slept very well during night. Appetite fairly good. Bowels moved slightly. Quiet this a. m.

March 14, 1905: General treatment—R Hydriodic acid Zi q 3 hrs., 9, 12, 3, 6. Strych. sulph. gr. 1-60 q 4 hrs., 8, 12, 4. Eggnog with whisky Zss at 11, 3, 7. Special diet. R Powder P. C. Patient slept fairly well during night. Restless, noisy, and disturbed from 6 a. m. until noon. R Tr Opil Camph. Ziss at 10 a. m. and noon. Quiet and sleeping since noon. Eat dinner. Salts Ziv at 10 a. m.

March 15, 1905: Somewhat disturbed during a. m.

March 16, 1905: Slept well and seemed comfortable. Bowels moved several times. Semiliquid stools. Restless at times during day.

March 18, 1905: General treatment—R Hydriodic Acid Zi q 3 hrs. 9-12-3-6. Strych. sulph. gr 1/60 per mouth q 4 hrs. 8-12-4. R powder P. C. Whisky

Zss milk Xvi q 4 hrs. Patient somewhat disturbed at intervals during day. Slept fairly well since midnight. Appetite fairly good. Bowels moved. Habits tidy.

March 19, 1905: Restless at times. Bowels constipated. Appetite fairly good. Up and walking around greater portion of time.

March 20, 1905: General treatment—Strych. sulph. gr. 1/60 per mouth q 4 hrs. 8-12-4. R liquor pepsin dissolved Zii P. C. Special diet. Eggnog with whisky Zss q 4 hrs. 11-3-7. Liq. Potas. Bromi. Zii A. C. Somewhat restless and disturbed at intervals during day. Bowels did not move.

March 22, 1905: Simple enema at 10 a. m. Bowels moved. Constipated stool. Turpentine steepes frequently from 7 until 10.30 p. m.

March 23, 1905: Bowels moved several times. Semiliquid stools. Slept fairly well since 10.30 p. m.

March 23, 1905: General treatment—Strych. sulph. gr. 1/60 per month at 8-12-4. Eggnog with whisky Zss at 11-3-7. R Acezone at aqua mixt. Zviii q 4 hrs. 11-3-7. Special diet. Somewhat restless this a. m.

March 25, 1905: Patient restless greater portion of day. Trional grs. X at 8 p. m. Restless at intervals during night. Quiet this a. m. Takes medicine very well. Appetite fairly good. Bowels moved. Soft-formed stool. Voids urine frequently.

March 28, 1905: Patient disturbed at intervals past few days. Noisy and restless. Medicine very little effect.

March 29, 1905: General treatment—Strych. sulph. gr. 1/60 per mouth q 4 hrs. 8-12-4. R acetozone mixt. Zviii q 4 hrs. 11-3-7. Special diet Milk q few hours. Patient fairly well during night. Very much disturbed and excited all a. m. Running about and screaming at times. Bowels moved. Appetite very good. Tr. Opii Camph. Zii at 10 a. m. Continued noisy and restless. Trional with whisky Zss and hot milk at 7.30 p. m.

April 1, 1905: Patient restless and noisy at times. Quiet and slept fairly well during night. Bowels moved regularly. Habits fairly tidy.

April 5, 1905: General treatment—Strych. sulph. gr. 1/60 per mouth at 8-12-4. Special diet. Milk q few hrs. R acetozone mixt. Zvi q 4 hrs. 11-3-7. Condition remains about the same; disturbed at times, noisy and restless. Slept fairly well during night. Bowels natural.

April 7, 1905: Patient disturbed at intervals during day. R. Trional grs. XV at 7.30 p. m.

April 8, 1905: Slept well all night and greater portion of day. Abdomen distended. Bowels reg.

April 9, 1905: Slept well; somewhat restless and disturbed this a. m.

April 12, 1905: General treatment—Strych. sulph. gr. 1/60 per mouth at 12-4-8. R acetozone mixt. Zvi q 4 hrs. 11-3-7. Special diet. Milk q few hours. Patient quiet and slept well. Seems weak this a. m. Up walking around at times. Somewhat disturbed. Bowels moved. Stool soft formed. Appetite fairly good. Expectoates great deal. Habits usually tidy.

April 15, 1905: Patient restless at times. Sleeps very well. Bowels reg. Habits tidy. Appetite very good.

April 20, 1905: General treatment—Strych. sulph. gr. 1/60 per mouth q 4 hrs. 8-12-4. R. Acetozone Mixt. Zvi q 4 hrs. 11-3-7. Milk with whiskey Zss q 4 hrs. Special diet. Patient disturbed from 10 p. m. until 3 a. m. Trional, grs. Xv. slept fairly well since. Somewhat restless and disturbed this a. m. Seems stronger physically. Bowels slightly constipated. Habits fairly tidy.

April 22, 1905: Cascara Mixt. Zii at 10 a. m. Trional, grs. XV.

April 23, 1905: Disturbed for short while. Bowels moved several times. Quiet this a. m.

May 9, 1905: Condition of patient very little changed. Restless and noisy at times. Bowels regular. Habits untidy at times. Imagines the building is falling in on her. Appetite very good. Doesn't sleep very well without medicine. Expectoates good deal.

May 18, 1905: Patient disturbed and noisy greater portion of time. Tries to pull other patients out of bed. Imagines the ceiling is falling down on the people. Bowels regular. Has to have medicine to sleep nearly every night.

May 29, 1905: General treatment—Strych. sulph., gr. 1/60 per mouth q 4 hrs. 8-12-4. Special diet. Patient more or less disturbed all time. R. powder last eve. at 7 p. m. Slept well all night. Bowels reg. Expectoates good deal. Habits fairly tidy. Appetite fairly good.

June 3, 1905: Patient very restless and disturbed greater portion of day. Verinal, grs. X at 7 p. m.

June 4, 1905: Slept well during night. Quiet until noon. Restless and disturbed at intervals rest of day. Verinal, grs. X at 7 p. m.

June 5, 1905: General treatment—Strych. sulph., gr. 1/60 per mouth at 12-4-8. Special diet. Verinal, grs. X at 7 p. m. Slept fairly well until mdt. Disturbed from 12 until about 4 a. m. Very restless. Fell out of bed. Did not seem to hurt herself. Stupid greater portion of day. Bowels moved slightly. Void urine Q s. Appetite fairly good. Restless latter portion of evening. Verinal, grs. X at 7.30 p. m. Quiet and slept well all night. Did not void urine during night. Took very little nourishment.

June 6, 1905: General treatment—Strych. sulph., gr. 1/60 per mouth q. 4 hrs. 8-12-4. Special diet. Liq. Pepsin Zii. P. C. Stupid until noon. Restless since. Catheterized at 12.30 noon. Slept from 1 p. m. until 4.30, restless & disturbed until 11 p. m. Eat very good supper. Vironal powder, grs. V at 7 p. m. Voided urine.

June 7, 1905: Quiet and slept well since 4 p. m. Did not awake her for medicine and nourishment. Sleeping this a. m.

June 10, 1905: Patient restless and disturbed more or less all time. R. medicine every night. Bowels more regular. Appetite fairly good.

June 20, 1905: Condition of patient continues about the same. Restless and disturbed at times. Did not sleep very well past two nights. R. medicine every night. Bowels regular. Appetite fairly good. Goes out good days. Physically seems stronger.

June 28, 1905: Patient very much improved past few days. Slept well without medicine. Quiet and cheerful during day. Food agreed with her. Appetite good. Bowels regular.

July 1, 1905: Somewhat disturbed and restless. Powder at 7.30 p. m.

July 3, 1905: General treatment—Strych. sulph. gr. 1/60 per mouth at 8-12-4. R. Liq. Pepsin, Zii. P. C. Special diet. Slept well during night. Seems fairly comfortable this a. m. Up and around. Abdomen distended; bowels slightly constipated. Appetite fairly good. Habits usually tidy.

July 20, 1905: Still some clouding of consciousness. Patient understands that she is not at her home, but does not comprehend the exact nature of this institution. Her memory for past events fairly good, but there is no registration for recent events. Ideation is rapid and coherent. She answers intelligently simple questions, but her thoughts are principally subjective and of a painful nature. Imagines that she has done some great wrong; that various evils will befall her family and herself.

Delusions of self-accusation present. Emotional state one of deep depression, with marked agitation. Continually when awake wandering around the ward. To some extent she is more quiet and her noisy periods are not so frequent.

The chronic bronchitis is better and expectoration not so free. Breathing is also improved and heart action fairly good.

Bowels somewhat constipated with distention (flattened) of abdomen. The patient is probably more agitated when her abdomen is distended. She requires frequent purgatives. Sleep is disturbed and frequent doses of hypnotics are administered. Appetite fairly good. General health and strength has improved.

July 22, 1905: General treatment—Strych. sulph. gr. 1/60 per mouth q. 4 hrs. 8-12-4. R. Liq. Pepsin, zii, P. C. Bismuth, Beta Naph. tab. q. 3 hrs. 9-12-3-6. Special diet. Patient restless and disturbed more or less all time. Slept fairly well last night. Bowels constipated. Appetite fairly good. Slightly disturbed during p. m. Liq. Potas. Bromi. Zii. at 7.30 p. m.

July 23, 1905: Restless and disturbed greater portion of night. Only slept about 2 hours. Bowels moved; constipated stool.

July 24, 1905: Patient restless and very much disturbed, early part of night. R. Vironal grs. viii. at 12 mdt. Quiet and slept fairly well since bowels moved; slightly constipated. Appetite good. Out during morning.

July 27, 1905: Somewhat disturbed greater portion of time. Bowels did not move. Liq. mag. sulph. ziss. at 6 a. m. Disturbed short while during p. m. Liq. Potas. Bromi, Zii at 7.30 p. m.

July 28, 1905: Rested well during night. Disturbed at times during day.

September 2, 1905: General treatment: Strych. sulph. gr. 1/60 per mouth, q. 4 hrs. 8-12-4. R. powder q. 4 hrs. 8-12-4. Special diet. R. cascara Zii. at 10 a. m. Patient not quite so well. Eat very little during day. Inclined to be disturbed. Bowels moved three times. Soft formed stools.

September 5, 1905: Patient quiet and slept greater portion of day.

September 6, 1905: Bowels moved. Stool constipated. Disturbed at intervals during day. Slept well. Appetite fairly good.

September 18, 1905: General treatment.—Strych. sulph. gr. 1/60 per mouth at 8-12. Special diet. Patient slept fairly well. Bowels moved; soft formed stool. Excited and noisy at times.

September 20, 1905: General condition of patient remains about the same. Bowels regular. Past few days disturbed and excited at times. Habits tidy.

September 25, 1905: Patient disturbed and restless greater part of time. Bowels regular. Habits tidy. Appetite fairly good. R. Powder every night.

October 5, 1905: General treatment: Strych. sulph. gr. 1/60 per mouth, at 8-12-4. R, liq. pepsin, Zii, P. C. Special diet. Patient very much disturbed past week. Noisy and restless. Bowels reg. Appetite fairly good. Liq. potas. bromi. Ziss c. vin xericum Zi at 10 a. m.

October 10, 1905: Quiet for short while. Slept fairly well during night. Disturbed and noisy during p. m.

October 16, 1905: Patient restless and disturbed greater portion of time. Bowels constipated. Habits tidy. Appetite fairly good. Refuses med. past few days.

October 20, 1905: Bowels have not moved for three days. Disturbed and restless greater portion of time. Simple enema at 1.30 p. m. Bowels moved twice—one constipated stool and one soft formed. Voids urine.

October 27, 1905: Condition of patient remains about the same. Disturbed greater portion of time. Bowels more regularly. Appetite fairly good.

October 28, 1905: Refused medicine and nourishment. Slept very little during night. Restless and disturbed this a. m.

November 3, 1905: General treatment: Strych. sulph. gr. 1/60 per mouth, q. 4 hrs., 8-12-4. Special diet. Aromatic spts. amonia. Zss pprn. Patient restless and disturbed greater portion of time. Imagines gas is escaping or the house is falling down. R, viroanal grs. X at 7.30 p. m.

November 4, 1905: Slept greater portion of night. Quiet until evening. Suffering with shortness of breath and disturbed and restless until midnight R, viroanal, grs. X at 7 p. m.

November 5, 1905: Atrofua sulph. gr. 1/120. Nitro-glycerine gr. 1/100. Morphia sulph. gr. 1/8 per mouth at 2 a. m.

November 5, 1905: Patient walked around short while. Seems weak. Eat good breakfast. Bowels moved. Voided urine q. s. R, inhalation of feed hrs. of R. Benzoin. spts. turpentine, and creosote Zi to qt. boiling water.

November 5: R, Atropine sulph. gr. 1/120. Nitro-glycerine gr. 1/100 per mouth at 6.30 p. m. R, strych. sulph. gr. 1/60 per mouth q. 4 hrs. 8-12-4. Liq. pepsin P. C. Zii. Special diet. Patient rested fairly well during night. Took inhalation very well. Bowels moved formed stool. Restless this a. m. Takes medicine and nourishment very well.

November 6, 1905: General treatment: Strych. sulph. gr. 1/60 per mouth q. 4 hrs. 8-12-4. R, inhalation of feed hrs. Special diet.

November 7, 1905: Patient somewhat disturbed during evening. R, veronal grs. X at 7.30 p. m.

November 8, 1905: Slept very little during night. Bowels moved, soft-formed stool. Restless and disturbed this a. m. for short while. Appetite fairly good.

November 16, 1905: Seldom sleeps without medicine. Patient cold in head and chest. R, powder q. 4 hrs. Very restless at times. Appetite fairly good. Imagines the house is afire and very noisy at times.

November 17, 1905: General treatment.—Strych. sulph. gr. 1/60 per mouth at 12-4-8. Special diet. R, sleeping medicine prn. Patient seems better to-day physically. Appetite very good. Slept well during night; very restless and excited since noon. Imagines the house is afire and the men are burning straw. Bowels moved; constipated stool.

November 25, 1905: Patient is very well physically; has slight cough; expectorates freely; habits tidy. R, medicine at night. Seldom sleeps without. Bowels constipated. Appetite fairly good. Excited and noisy greater portion of time.

December 8, 1905: General treatment.—Strych. sulph. gr. 1/60 per mouth at 12-4-8. R, cough mixt. Zii at 10-2-6. Special diet. General health of patient fairly good. Appetite very good. Medicine every evening to make her sleep. Bowels constipated. Imagines the house is falling or on fire. Always trying to get the lights down. Habits usually tidy.

December 12, 1905: General condition remains about the same; very much disturbed greater portion of time. Cough good deal. Bowels regular.

December 19, 1905: Patient continues noisy and very restless at times. Medicine every night. Very restless this a. m. Bowels have not moved. Appetite very good.

December 19, 1905: Slept very little during night. Complaints of back pain. R, Veronal grs. X, at 7 p. m.

December 20, 1905: Patient slept well all night. Very restless and somewhat disturbed during day. Veronal powder at 7.30 p. m. Restless and noisy greater portion of night. Liq. potas. bromi. Zss at 3 a. m. Slept few hours last part of night.

December 21, 1905: Fell and struck elbow. Complained of it paining during day. Restless this a. m. Bowels constipated. Refuses to take any medicine. Appetite very good. Imagines she is going to be killed.

December 25, 1905: Physically patient about as well as usual. Bowels constipated. Appetite very good. Disturbed more or less all time. Liq. bromi. Zii. Liq. clin. camph. Zii at 7.30 p. m. for past week. R, Veronal grs. X at 8.30 p. m.

December 28, 1905: Quiet and slept all night.

December 29, 1905: Somewhat restless this a. m. Bowels moved; constipated stool. Appetite fairly good. Habits tidy. Expectorates freely.

January 4, 1906: Patient quiet and slept well during night. R, powder veronal at 7.30 p. m. Bowels regular.

January 6, 1906: Patient restless past two days. Veronal powder grs. X at 7.30 p. m. Slept fairly well. Habits tidy. Refuses medicine most of time. Appetite fairly good.

January 15, 1906: Physically patient stronger generally. Bowels regular. Appetite good. Disturbed and restless greater portion of time. Veronal powder every night about 7.30. Voids urine q. s.

January 17, 1906: Patient quiet and slept well until 5 a. m. Got up and walked around for short while quietly. Fell and injured limb at 5.30 a. m.

January 17, 1906: General treatment.—R cough mixt. Zii at 10-2-6. Strych. sulph. gr. 1/60 per mouth at 12-4. Special diet. Patient cries out at times. Says limb pains great deal. Bowels moved; formed stool. Voids urine q. s.; eat very good breakfast. R morphia sulph. 1/4 gr. per mouth at 5 p. m. and 11.30 p. m. Patient restless at times during night.

January 18, 1906: Morphia sulph. gr. 1/4 per mouth q. 4 hrs. if restless. Had dose at 7 a. m., 4 p. m., and 8 p. m., 12 midnight. Patient eat very good breakfast. Quiet and sleeping since 9 a. m. Resting comfortably. Bowels did not move. Voids urine.

January 19, 1906: Quiet and seemed fairly comfortable during day. Slept at intervals. Restless and slept very little during night. Imagined bear would eat her. Epsom salts Zss at 7 a. m. Morphia sulph. gr. 1/4 per mouth at 7 a. m. Patient fairly comfortable. Bowels have not moved. Voids urine q. s. Abdomen distended. Takes nourishment and food fairly well.

January 20, 1906: General treatment.—R cough mixt. Zii at 10-2-6. Strych. sulph. gr. 1/60 per mouth at 12-4. R. morphia sulph. gr. 1/4 per mouth q. 4 hrs. if necessary. Liq. mag. sulph. Zss at 8 p. m. et mdt. Veronal powder at 8 p. m. Restless first portion of night. Bowels moved twice. Soft formed stools. Slept fairly well last part of night. Seems fairly comfortable this a. m. Some swelling in limb. Temperature normal. Pulse fairly good. Takes med. and nourishment fairly well. Habits tidy. Liq. potas. bromi. Zss q. 4 hrs. when disturbed. General treatment.—Strych. sulph. gr. 1/60 per mouth at 12-4-8. R cough mixt. Zii at 10-2-6. Special diet. Liq. potas. bromi. Zss q. 4 hrs. if necessary.

January 20, 1906: Disturbed and restless about 2 hours. R. veronal grs. Xiii at 7.30 p. m. Bowels moved. Liquid stools.

January 21, 1906: Patient slept the entire night. Some discoloration on inside of thigh. Slightly swollen. Eat very good breakfast. Seems very comfortable. Slept greater portion of day. Eat very little dinner. Bowels moved. Voids urine. Takes good deal of milk.

January 22, 1906: General treatment.—Strych. sulph. gr. 1/60 per mouth at 12-4-8. R cough mixt. Zii at 10-2-6. Milk q. few hrs. Special diet. Liq. potas. bromi. Zss q. 4 hrs. if necessary. Patient restless and somewhat disturbed early portion of night. R. veronal powder, grs. X at 10 p. m. Quiet and slept fairly well last part of night. Bowels moved. Liquid stools. Refuses medicine. Takes nourishment fairly well. Seems to suffer good deal with limb. Complains of back paining at times. Sleeping most of time this a. m. Veronal, grs. X at 7.30 p. m.

January 23, 1906: Slept fairly well first part of night. Liq. bromi. potas. Zss at 3 a. m. Restless greater portion of time. Patient fairly comfortable during day. Refused med. Took nourishment fairly well.

January 24, 1906: Somewhat restless and disturbed during evening. Veronal, grs. Xiii at 7.30 p. m. Slept fairly well first part of night; disturbed later. Liq. potas. bromi. Ziiii at 3 a. m. Restless at times during day. Took very little nourishment. R. med. as usual. Habits untidy at times. Coughing and expectorating good deal. Complained of shortness of breath. Spts. aromatic ammonia Zi at 4 p. m. R. veronal, grs. X at 7.30 p. m.

January 25, 1906: General treatment—R. Cough mixt. Zii q. 4 hrs. 10-2-6. Strych. sulph. gr. 1/60 per mouth at 12-4-8. Aromatic spts. ammonia Zi at 9 a. m. Milk q. few hrs. Patient slept fairly well until 10 p. m. Disturbed short while. Liq. potas. Bromi. Zss. Liq. Chlo. Hydt. Zii at 11 p. m. Quiet and slept fairly well since 12 midnight. Coughing and expectorating good deal this a. m. Bowels have not moved. Voids urine q. s. Takes nourishment and med. fairly well. Habits becoming very untidy. Both feet somewhat swollen. Expels good deal gas. Morphia sulph. gr. 1/4 at 7 p. m.

January 26, 1906: R. Morphia sulph. gr. 1/8 with Vin. Xericum Zss if breathing labored and short. Repeat in 2 hrs. if not relieved. Cascara mixt. Zi at 10 a. m. Patient slept well during night. Simple enema at 7 a. m. Bowels move slightly. Constipated stool. Voids urine frequently. Seems comfortable this a. m. Sleeping good deal. Took nourishment fairly well. Morphia sulph. gr. 1/8 with Vin Xericum Zss at 1 p. m. et 4 p. m. and 1/4 gr. at 8 p. m. Restless and disturbed greater portion of night. Liq. Bromi. Potas. Zss. Liqu. Chlo. Hydt. Zii. Aro. Spts. Ammonia Zi at 3 a. m.

January 27, 1906: Slept very little. Disturbed this a. m. Bowels moved. Soft-formed stool. Morphia sulph. gr. 1/4 at 10 a. m., 4 p. m.

January 28, 1906: General treatment.—R. Strych. sulph. gr. 1/60 per mouth at 12-4-8. R. cough mixt. Zii q. 4 hrs. 10-2-6. Special diet. R. morphia sulph. gr. 1/4 with Vin Xericum Zss if disturbed or breathing labored. Patient restless until 10 p. m. R. Veronal, grs. X at 10 p. m. Quiet and slept fairly well after mdt. Somewhat disturbed for short while this a. m. Bowels moved; formed stool. Refused breakfast. Patient uses fractured limb. Some swelling in foot. Habits untidy. Cough and expectorates good deal. Very restless at times, trying to get out of bed. Morphia sulph. gr. 1/4 at 5.30 p. m.

January 29, 1906: Patient slept well during night. Seems fairly comfortable this a. m. Takes very little nourishment. Morphia. sulph. gr. 1/4 at 4 a. m. R. Veronal, grs. X at 7.30 p. m.

January 30, 1906: Quiet and rested fairly well during night. Bowels did not move. Cascara mixt. Zi at 10 a. m. Slept greater portion of morning. Took med. and nourishment very well. Seems to suffer very little. Disturbed short while after noon. Quiet and slept great deal during afternoon. Disturbed short while between 7 and 8 p. m.

January 31, 1906: Quiet and slept well all night. Bowels moved. Takes med. and nourishment very well. Seems very comfortable this a. m.

February 1, 1906: General treatment.—R. Cough mixt. Zii q. 4 hrs. 10-2-6. Strych. sulph. gr. 1/60 per mouth q. 4 hrs. 8-12-4. Special diet. Milk q. few hrs. Patient somewhat restless early part of night. R. Veronal, grs. X at 11 p. m. Quiet and slept fairly well rest of night. Takes med. and nourishment fairly well. Bowels moved. Soft-formed stool. Seems fairly comfortable this a. m. Habits untidy.

February 3, 1906: General condition of patient fairly good. A little restless at times. Slept well. Bowels constipated. Cascara mixt. Zi at 10 a. m.

February 4, 1906: Bowels moved three times. Soft-formed stools. Voids urine small quantities and very high color and strong odor.

February 5, 1906: Patient restless and complained of shortness of breath. Aromatic spts. ammonia at 2.30 a. m., which seemed to relieve her. Seems fairly comfortable this a. m. Takes very little nourishment and med. very well.

February 7, 1906: Condition continues about the same. Bowels have not moved. Seems fairly comfortable. Cross and irritable at times. Takes very little nourishment. Slept fairly well. Voids urine q. s.

February 9, 1906: General treatment—R. Cough mixt. Zii q. 4 hrs., 10-2-6, Strych. sulph. gr. 1/60 per mouth q. 4 hrs. 8-12-4. Special diet. Patient was restless and slept very little during night. Bowels moved. Takes very little nourishment.

February 11, 1906: Patient continues to do fairly well generally. A little restless at times. Bowels constipated. Takes very little food. Voids urine

q. s. Habits untidy. Morphia Sulph. gr. $\frac{1}{2}$ per mouth past two nights at 7.30. Slept fairly well.

February 13, 1906: General condition of patient remains about the same. Restless and disturbed at times. R. medicine for bowels fr. r/n. Habits untidy. Restless during last night. Bowels moved. Takes medicine and nourishment very well.

February 14, 1906: Patient very restless during evening.

February 15, 1906: R. Veronal grs. X with Eggnog at 7.30 p. m. Quiet, and slept well all night. Bowels moved. Quiet, and slept greater portion of day.

February 17, 1906: General condition continues about the same. Veronal powder last evening. Right cheek very much flushed during p. m.

February 18, 1906: General treatment—R. cough mixt. Zil q. 4 hrs. 10-2-6. Strych. sulph. gr. 1/60 per mouth at 8-12-4. Special diet. Eggnog at 7.30 p. m.

February 19, 1906: Patient very restless and disturbed at times during day. Complained of back pain. Took nourishment very well. Bowels didn't move. Voided urine frequently. Morphia sulph. gr. 1/60 with Vin Xericum at 1.30 p. m. Restless during night; noisy at times. Quiet and sleeping this a. m.

February 21, 1906: General treatment—R. Cough mixt. Zil at 10-2-6. Strych. sulph. gr. 1/60 per mouth at 12-4-8. Special diet. Eggnog at 7.30. R. Veronal grs. X at 7.30 p. m.

February 22, 1906: Patient restless and coughed good deal early portion of night. Quiet and slept fairly well later portion. Seems fairly comfortable this a. m. Took very little breakfast. Bowels haven't moved. Voids urine frequently in small quantities. Habits untidy.

February 24, 1906: General condition of patient remains about the same. Restless at times. Slept fairly well last night.

February 26, 1906: Patient restless and disturbed greater portion of night. Refused medicine. Restless and noisy at intervals during day. Bowels did not move. Sit up in chair about $\frac{1}{2}$ of hour; complained of being tired. Very much disturbed during evening. Refused med. Morphia sulph. gr. $\frac{1}{2}$ per mouth at 7 p. m.

February 27, 1906: Slept about two hours. Restless and disturbed greater portion of night. Restless and disturbed this a. m. Bowels have not moved. R. glycerin suppository at 10 a. m. Continues very restless. Voids urine q. s. Appetite fairly good.

March 1, 1906: R. cough mixt. Zil at 10-2-6. Strych sulph. gr. 1/60 per mouth at 8-12-4. Special diet. R. medicine p. r. n. Patient very restless and disturbed at times; slept very little. Bowels constipated. Glycerin suppositories ii.

March 2, 1906: Bowels moved; formed stool. Sit up in chair for short while. Takes medicine very well. Appetite fairly good. Very restless, but in good humor; talking great deal.

March 3, 1906: Patient slept very well since 10 p. m. Bowels have not moved. Refused nourishment and medicine.

March 5, 1906: Patient quiet and slept good deal during day. Voided urine several times. Bowels didn't move. Sit up in chair about three-quarters of hour. Seemed very comfortable until about 5 p. m. Complained of pain in head and chest for short while. Took good deal of nourishment and medicine very well: Cascara mixt. Zi at 7 p. m.

March 6, 1906: Restless and wakeful until midnight. Slept well remainder of night. Did not take any medicine or nourishment. Sleeping good deal this morning. Bowels have not moved. Bowels moved about 7 p. m. Constipated stool.

March 7, 1906: General treatment.—R. cough mixt. Zil at 10, 2, 6. Strych. sulph. gr. 1/60 per mouth at 8, 12, 4. Eggnog 7, 11, 3. Special diet. Patient quiet and slept greater portion of day. Took very little nourishment and med. Voided urine several times.

March 8, 1906: Patient slept greater part of night. Complained of pain in side. Morphia sulph. gr. 1/6 with Vin Xericum Zss at 10 a. m. Patient very much excited and noisy during p. m., trying to get out of bed. Veronal powder grs. X at 8 p. m. Bowels have not moved. Refused to take nourishment. Voided urine frequently.

March 9, 1906: Patient slept greater part of night and was quiet when awake. Seems very weak physically this a. m. Quiet and asleep most of time. Took a little milk and oatmeal for breakfast. Took medicine very well. Bowels haven't moved. Habits untidy. Bowels moved at 3 p. m. Constipated stool.

March 10, 1906: Patient seems very much stronger this a. m. Restless at

times during night. Cascara mixt. Zi at 10 a. m. Patient quiet most of day. Took med. well. Eat full dinner and supper. Took milk frequently.

March 11 and 12, 1906: Patient restless at times during night. Bowels moved. Somewhat disturbed this a. m. and restless. Took nourishment fairly well.

March 21, 1906: General treatment.—R. cough mixt. Zil q. 4 hrs., 10, 2, 6. Strych. sulph. gr. 1/60 per mouth at 8, 12, 4. Special diet. Eggnog at 11, 3, 7. Patient restless all night. Slept short while after 1 o'clock. Very restless this a. m. until 8 a. m. Refused food. Bowels moved slightly. Slept since. Habits untidy.

March 23, 1906: Patient very restless and much disturbed during p. m. Veronal grs. lii at 7 p. m. Patient slept well during night.

March 24, 1906: Patient fairly quiet during a. m. Somewhat restless during evening.

March 25, 1906: Slept greater portion of night; restless this a. m. Morphia sulph. gr. 1/6 at 9.30 a. m.

March 27, 1906: Patient restless and very much disturbed at intervals during day. Slept very well at night. Bowels moved. Stool constipated. Took nourishment and medicine fairly well. R. Veronal powder grs. viii at 6.30 p. m.

March 28, 1906: Slept greater portion of night. Very restless this a. m., trying to get out of bed. Noisy also. Imagines she has some disease or she has killed some one or she has been killed. Bowels have not moved. Took medicine and nourishment fairly well. Sit up in chair short while. Habits untidy.

March 30, 1906: Patient restless and disturbed during day at times. Refused cascara. Slept well.

March 31, 1906: Bowels moved this a. m. Slept very little during night. Somewhat restless this a. m.

March 30, 1906: General treatment.—R. cough mixt. Zil q. 4 hrs. 10, 2, 6. Strych. sulph. gr. 1/60 per mouth at 8, 12, 4. Eggnog at 11, 3, 7. Special diet.

March 31, 1906: Patient very restless during p. m. R. Veronal grs. viii at 6.45 p. m.

April 1, 1906: Patient quite restless and disturbed until after 4 a. m. Slept greater portion of day. Took good deal of milk and food. Refused medicine. Habits untidy.

April 2, 1906: Quiet and slept most of night. Restless at times this a. m. Eat good breakfast. Bowels have not moved. Cascara mixt. zi at 10 a. m.

April 5, 1906: Condition of patient remains about the same. Restless and disturbed at times. Bowels moved; stool constipated.

April 7, 1906: Patient did not sleep any during night; very restless and disturbed greater portion of day. Sit up all afternoon. Bowels moved. Eat good deal; took medicine well.

April 8, 1906: Slept fairly well during night; restless and disturbed at times during day. Bowels moved. Took food and medicine very well. Liq. potas. bromi. zss. Liq. chlo. hyd. zii at 7 p. m.

April 9, 1906: Quiet and slept well. Quiet this a. m. Takes food and medicine very well. Habits untidy. Cascara mixt. zi at 10 a. m. Restless and disturbed all day.

(At 12.20 o'clock p. m. the committee took a recess until 2 o'clock p. m.)

AFTER RECESS.

The committee reassembled at the expiration of the recess.

TESTIMONY OF DR. CHARLES H. CLARK—Continued.

Dr. CHARLES H. CLARK, who had been previously sworn, continued his testimony, as follows:

Mr. WALLACE. Doctor, in speaking this morning of the number of people out there, did you include everything that works on the ground—attendants and all?

Doctor CLARK. In the number of 700; yes. That includes all the employed.

Mr. WALLACE. That is about 700 attendants, is it not?

Doctor CLARK. No, sir.

Mr. WALLACE. That includes everybody who works around the yard and different places there?

Doctor CLARK. It includes everybody on the pay roll.

Mr. WALLACE. What is the number of attendants?

Doctor CLARK. The number of attendants is about 300. We have 288 attendants, and we have about 12 people employed as domestics, who work in conjunction with the attendants.

Mr. WALLACE. In your calculation this morning of the number of people who work at St. Elizabeth's, as compared with other asylums over the country, do you base it upon the 700?

Doctor CLARK. I made a comparison upon the total number of employees.

Mr. WALLACE. Have you made a comparison on the attendants?

Doctor CLARK. Two of those institutions—the Massillon State Hospital and the Columbus State Hospital—were based upon a comparison of the attendants, not the employees.

Mr. WALLACE. Were your attendants larger in number in proportion than theirs?

Doctor CLARK. Yes, sir.

Mr. WALLACE. Was your whole force larger than theirs?

Doctor CLARK. Very much larger.

Mr. WALLACE. How do your patients at St. Elizabeth's compare in number with the Ohio institutions?

Doctor CLARK. In the Ohio institutions the number of patients is less than at the Government hospital.

Mr. WALLACE. I believe I understood you to say that you had a large number of sick patients in the hospital?

Doctor CLARK. Yes, sir.

Mr. WALLACE. Do they require a larger number of attendants than the other kind of patients you have?

Doctor CLARK. Oh, yes; proportionately, they require a larger number.

Mr. WALLACE. What is the per cent of your sick patients to the others?

Doctor CLARK. We have in round numbers about 300 sick out of about 2,550. The number varies from day to day, but I will put it in round numbers about 250 to 300. That is approximately the number.

Mr. WALLACE. And what is the number of attendants you have for that class?

Doctor CLARK. Where we have six I think we will average one attendant to six patients.

Mr. WALLACE. One attendant to six patients?

Doctor CLARK. Yes; one to six.

Mr. WALLACE. What do you average on the other classes?

Doctor CLARK. About one to eight and a fraction. The total would be one to eight and a fraction.

Mr. WALLACE. Doctor, how did you reach your comparison with these other institutions?

Doctor CLARK. By studying the handbook issued by the New York State lunacy commission.

Mr. WALLACE. Does that give all of them?

Doctor CLARK. It gives all of them; yes, sir.

Mr. WALLACE. You had no books direct from each of the other hospitals?

Doctor CLARK. No. I had letters from the superintendents of the other hospitals, and I was connected with the other two hospitals in person for a period of time in each one.

Mr. BARCHFELD. You are the clinical director of St. Elizabeth's asylum for the insane?

Doctor CLARK. Yes, sir.

Mr. BARCHFELD. You have general supervision of the clinical care and treatment of the patients?

Doctor CLARK. Yes, sir; since the first of April.

Mr. BARCHFELD. How many assistants have you?

Doctor CLARK. We have about 11 on the staff now, I think.

Mr. BARCHFELD. Eleven on the staff?

Doctor CLARK. We have a few vacancies.

Mr. BARCHFELD. The 11 are residents?

Doctor CLARK. Yes, sir.

Mr. BARCHFELD. Those are regular physicians?

Doctor CLARK. Yes, sir.

Mr. BARCHFELD. Who are not only resident physicians, but who are in charge of various departments under you?

Doctor CLARK. Yes, sir.

Mr. BARCHFELD. You also have some internes?

Doctor CLARK. I included the internes in that number.

Mr. BARCHFELD. The internes are included?

Doctor CLARK. Yes, sir.

Mr. BARCHFELD. Eleven, all told?

Doctor CLARK. Yes, sir.

Mr. BARCHFELD. You say you have several vacancies?

Doctor CLARK. Yes, sir.

Mr. BARCHFELD. How many vacancies have you?

Doctor CLARK. I think the superintendent has called for three to four. He may select four I believe. He has called for an examination to be held the first week in June I believe.

Mr. BARCHFELD. After the commencement exercises of the various medical colleges?

Doctor CLARK. Yes, sir.

Mr. BARCHFELD. How long do you keep your internes there?

Doctor CLARK. They come under the civil-service rules, and quite a number of them have been promoted from the position of interne to juniors, and from juniors up the line to seniors.

Mr. BARCHFELD. Do you allow your internes any salary?

Doctor CLARK. Yes, sir.

Mr. BARCHFELD. What is their salary?

Doctor CLARK. They get \$50 a month.

Mr. BARCHFELD. That is more than they receive at any other institution, is it not, so far as you know?

Doctor CLARK. That is almost as much as I received when I was first assistant in the Ohio hospitals. I got \$57.33 a month.

Mr. BARCHFELD. I am president of a hospital in my city, and we have three internes there. We do not pay them a dollar. The boys are glad to serve, so that they can have experience. This is the first

instance I ever knew of internes being paid for their work. It is a competitive examination for internes, is it not?

Doctor CLARK. Yes, sir.

Mr. BARCHFELD. It is conducted entirely under the Civil Service Commission?

Doctor CLARK. Yes, sir.

Mr. BARCHFELD. It was formerly conducted under the management of the institution, or the superintendent?

Doctor CLARK. We held one examination.

Mr. BARCHFELD. How long have you been at St. Elizabeth's?

Doctor CLARK. Something over six years now. It will be seven years in December.

Mr. BARCHFELD. It was brought out in the testimony this morning that one or two patients had fractured ribs and fractured femurs. Is it not characteristic of insane patients to be susceptible to fractures?

Doctor CLARK. In my experience it has been; yes, sir.

Mr. BARCHFELD. That is almost practically a truism, is it not?

Doctor CLARK. Yes; it is true.

Mr. BARCHFELD. It is also a common thing for people advanced in years to be susceptible to fractures?

Doctor CLARK. Yes, sir.

Mr. BARCHFELD. An old lady walking across the floor may slip on the carpet and dislocate or fracture her femur, and it may possibly be the direct cause of death. Is not that true?

Doctor CLARK. Yes, sir.

Mr. BARCHFELD. In your position as clinical director, do you ever allow patients to administer douches or water treatment to patients?

Doctor CLARK. No; not directly. We have patients who assist in the douche room, and do considerable work about there, tidying up the room or something like that.

Mr. BARCHFELD. They do not carry out your orders as to the temperature and kind of bath—whether it is a sitz, a hip, or a needle bath, whether it is a shower bath, or whether the temperature shall be 32 or 120?

Doctor CLARK. No; they have nothing to do with that. That is in charge of the bath attendant.

Mr. BARCHFELD. That is in charge of the bath attendant?

Doctor CLARK. Yes.

Mr. BARCHFELD. You spoke this morning of a certain class of patients who are pay patients, who are permitted to come to the institution, for whom the District of Columbia settles. Is that true?

Doctor CLARK. All patients committed to the institution by the District of Columbia are paid for by the District—that is, excepting a class where the friends pay. The Board of Charities in the District of Columbia investigates all those cases. They have a man present at the court hearing of the case, upon the regular commitment, and at that time the judge inquires into their financial condition, and if the patient's friends have sufficient funds, or if the patient has sufficient money, the patient is committed as a pay patient, and they are required to pay. If not, the patient is committed as an indigent case and charged up to the District of Columbia.

Mr. BARCHFELD. Do you know what is the appropriation of the District of Columbia to take care of the indigent insane at your hospital?

Doctor CLARK. I think they share the appropriation. I believe it is \$110 per capita, and the Government pays \$110.

Mr. BARCHFELD. How much do you receive from the District of Columbia, if you know? Do you know approximately how much the institution receives from the District of Columbia?

Doctor CLARK. I don't know as to that.

Mr. BARCHFELD. Do you receive \$20,000? Do you receive \$10,000 or \$40,000 a year?

Doctor CLARK. I would not be able to answer that, Doctor. I don't know a thing about it. I simply have understood the District of Columbia is indebted to the Government several million dollars for back pay for patients. It mounts up to a considerable sum.

Mr. BARCHFELD. That the District is indebted?

Doctor CLARK. As I understand; yes, sir.

Mr. BARCHFELD. To the institution?

Doctor CLARK. To the Government, you might say.

Mr. BARCHFELD. To the Federal Government?

Doctor CLARK. To the Federal Government.

Mr. BARCHFELD. Several million dollars?

Doctor CLARK. Well, yes; in the neighborhood of a million dollars or more.

Mr. BARCHFELD. In other words, you have no reason under the sun why you should detain a patient at that institution one day longer than is absolutely necessary?

Doctor CLARK. No, indeed; we are only too anxious to get rid of them.

Mr. BARCHFELD. It is your ambition, as the clinical director, the man who has charge of the medical and surgical force of the institution, to try and produce as many cures as possible?

Doctor CLARK. Yes, sir.

Mr. BARCHFELD. And when a patient is cured, improved, or not improved, as the case may be, and his friends and relatives demand the body or demand the person, you are only too anxious and willing to let the institution pass them over to their people. Is not that true?

Doctor CLARK. Yes, sir; that is true.

Mr. BARCHFELD. You have no desire to detain patients there one day longer than is absolutely necessary?

Doctor CLARK. No, sir; not at all.

Mr. BARCHFELD. Is not that true in all institutions?

Doctor CLARK. All institutions with which I have been connected, and all, as far as I know. Sometimes where in our judgment we consider the patient to be a dangerous patient to the community, or a homicidal patient, dangerous to have his liberty, we so warn the friends of the patient and make them assume all responsibility for the patient, relieving the institution from that, if they insist on taking the patient out, and when they assume that responsibility by signing a little statement to that effect, they are granted that privilege, so that in the event they should commit some act outside, the institution would not be held responsible for it.

Mr. BARCHFELD. Will you tell me how often the staff visits your institution—the visiting staff of medical men, surgical men, alienists?

Doctor CLARK. The staff in the city?

Mr. BARCHFELD. Yes, sir.

Doctor CLARK. They come frequently. They come whenever we

send for them. We generally wait until we get three or four cases; for instance, surgical cases. We wait until we get two or three, three or four, cases on hand. Then we will have the surgeon look over all of them, unless it is an emergency case. Then they respond by telephone call. They come right over.

MR. BARCHFELD. Then the staff does not visit the institution daily?

DOCTOR CLARK. Oh, no; not daily.

MR. BARCHFELD. You say you have a magnificent corps of physicians and surgeons as the staff of your hospital?

DOCTOR CLARK. Yes, sir.

MR. BARCHFELD. As good men as can be found in the District?

DOCTOR CLARK. Yes, sir; the best in the District.

MR. BARCHFELD. It is considered a recognition of professional efficiency for a progressive physician or surgeon to be attached to some hospital, is it not?

DOCTOR CLARK. Yes, sir.

MR. BARCHFELD. There is a clever rivalry among the leading physicians to get such recognition. They like to be appointed on the staff. Is not that so?

DOCTOR CLARK. Yes, sir; that is true.

MR. BARCHFELD. In the study of insanity, has the world made considerable progress in the last ten years?

DOCTOR CLARK. I think it has; yes, sir. I think especially in the classification—

MR. BARCHFELD. How long have you been a practitioner of medicine?

DOCTOR CLARK. About thirteen years.

MR. BARCHFELD. You know that in the last ten years they have practically made more advancement than they have in the preceding fifty years. Is not that true?

DOCTOR CLARK. Yes, sir.

MR. BARCHFELD. Particularly in the treatment of the insane?

DOCTOR CLARK. Yes, sir.

MR. BARCHFELD. And at your institution you have every progressive method and manner of treatment that any up-to-date insane hospital not only in this country but in the world has. Is not that true?

DOCTOR CLARK. I think we have, with one exception.

MR. BARCHFELD. What is that?

DOCTOR CLARK. That we are trying to install just as soon as we can. That is what we call the continuous-bath treatment. Those tubs are not manufactured in this country. The bathtub is a special size and requires special manufacture, and I think there is only one other institution in this country, one of the New York hospitals, that I think has one or two in operation. We hope to have this installed in a short time.

MR. BARCHFELD. Just as soon as you have that you will have everything any progressive institution in the country has?

DOCTOR CLARK. Yes, sir.

MR. BARCHFELD. What other institutions were you connected with?

DOCTOR CLARK. I was with the Ohio Hospital for Epileptics. My first experience was in the State Hospital, in Columbus, as resident physician for four years and a half. I was in the Ohio Hospital for Epileptics, at Gallapolis, the Columbus Hospital for the Insane,

at Columbus, Ohio, and the Massillon Hospital for the Insane, at Massillon, Ohio.

Mr. BARCHFELD. In the treatment of the insane, you allow your patients to do a certain amount of work?

Doctor CLARK. Yes, sir.

Mr. BARCHFELD. The work of patients is not only favorable to the treatment of the insane, but it is congenial to the management of the institution. Is not that true?

Doctor CLARK. Yes, sir; that is very true, indeed.

Mr. BARCHFELD. It takes the minds of the patients away from their real or imaginary ills or grievances?

Doctor CLARK. Yes, sir.

Mr. BARCHFELD. It is recognized as the standard of treatment, is it not?

Doctor CLARK. It is one of the means; yes, sir—getting them employed.

Mr. BARCHFELD. To keep them employed?

Doctor CLARK. Yes, sir.

Mr. BARCHFELD. And you do not employ any man who is sick, infirm, decrepid, to work, do you?

Doctor CLARK. No, sir.

Mr. BARCHFELD. You told us the story this morning of Mrs. Wright, who was under the restraining sheets. You said her lower limbs were bandaged; that she had had an operation for a lacerated perineum. Is that right?

Doctor CLARK. Yes, sir.

Mr. BARCHFELD. Is that right; a lacerated perineum?

Doctor CLARK. Yes, sir; a lacerated perineum.

Mr. BARCHFELD. That was absolutely necessary, was it not?

Doctor CLARK. I considered it so; yes, sir.

Mr. BARCHFELD. To keep those sutures intact and to keep the wound from suppurating?

Doctor CLARK. Yes, sir.

Mr. BARCHFELD. The standing of this institution, not only from your observation, but with the people throughout the country and the people who make a study of insanity, is recognized as one of the best in this country. Is not that true?

Doctor CLARK. Yes, sir.

Mr. BARCHFELD. Is it not true that people come from all over this country to visit your institution to observe the construction of the buildings and your mode and manner of treatment?

Doctor CLARK. Yes, sir; I just had the pleasure last week of showing a physician from the Indian service, in India, through our institution. He was sent there by his government to look over the eleemosynary institutions in this country. I took him through the entire institution.

Mr. BARCHFELD. They even come from abroad, all over the world?

Doctor CLARK. Yes, sir.

Mr. BARCHFELD. They come from Cuba, South America, Europe?

Doctor CLARK. Yes, sir.

The CHAIRMAN. Doctor, there is one thing I want to ask you that I omitted this morning. That is relative to the time that these attendants are on duty. Some of the attendants have suggested that better work could be done with eight-hour shifts—in other words, to

have three sets of men each working eight hours. What is your opinion on that?

Doctor CLARK. I don't see how such a system would be practical in an institution of that character.

The CHAIRMAN. Why not?

Doctor CLARK. There are a great many things to consider about that. In the first place, it would increase the force at least one-third; and then another question you would have to decide would be, Are you going to house those people there? Are you going to feed them there? Are you going to look after them and be responsible for that extra number of attendants? If you do not keep them there, then they will be required to live on the outside, and there would be the three shifts, as you say. One of them would go on at 6 o'clock in the morning and work until 2, another shift would work from 2 until 10, and then probably a third of the force from 10 until the next morning at 6.

The CHAIRMAN. Those objections are as to the economical administration of the hospital, are they not?

Doctor CLARK. Yes, sir; that is one objection.

The CHAIRMAN. Are there any other objections?

Doctor CLARK. I think every time you divide the responsibility of the care of the patients you have just that much additional trouble. For instance, a physician makes his rounds in the morning, under this eight-hour system. He would give certain orders and certain directions for the care and treatment of his patient. He would make an afternoon round and inquire of the nurse if such orders had been carried out. The first answer of greeting would be, "Why, I don't know; I wasn't here this morning." If you ask if the patient had his meal that noon: "I don't know; I wasn't here." There would be no end of trouble in that line. Then as to the hours of relieving, coming on duty.

The first change must occur early in the morning—at 6 o'clock.

That would require them to get up at least at 5 o'clock in the morning, eat their breakfast, and report for duty at 6. It seems to me there would be delays and all manner of trouble in that line. The same would be true of the afternoon, and especially the night change. Then there is another thing. A great many of our people out there, especially the women, consider that their home. It is their home—possibly the only home they have, you might say—and they have a beautiful home there—the nurses' home—which was built especially for them. They live there, and spend their time, to a great extent, in the institution. They look upon it as their home. A certain amount of discipline is maintained. They come under the rules and regulations of the institution, whereas, if they were on the outside of the institution, we could not exert any influence over them at all.

The CHAIRMAN. Is the discipline in the asylum formulated into regular rules and regulations that all the nurses and attendants must obey?

Doctor CLARK. We have certain prescribed rules and regulations as to the time they get up, the time they go to bed, and such things as that. That is about all there is to it.

The CHAIRMAN. Is there any difference in the treatment of the nurses, as to any of them being allowed more time than others?

Doctor CLARK. No; it is all the same, I think. That matter was

taken up with Doctor Richardson at one time, and he figured that it would cost at least \$60,000 more money to increase the force to the eight-hour system, and I think Doctor White has the same figures. I think he comes to the same conclusion. The same question, I believe, was agitated before the New York legislature at one time, and they found it to be impractical to establish that system in New York hospitals.

The CHAIRMAN. As far as you know, is there any institution where the eight-hour law prevails?

Doctor CLARK. There is one institution, I believe, in Illinois.

The CHAIRMAN. Do you know the name of it?

Doctor CLARK. I know very little about it. It seems to me they say the proportion of day attendants to patients is only 1 to 40 in that institution. That is about all I know about it.

Mr. WALLACE. Is that at Peoria.

Doctor CLARK. I don't know where it is.

The CHAIRMAN. Can you get us that information?

Doctor CLARK. I will try and get it for you.

Mr. HAY. What is the effect, Doctor, upon the attendants of fourteen hours on duty that way? Are they really on duty fourteen hours?

Doctor CLARK. No; they don't average fourteen hours. They only average eleven hours, figuring in the time off, the afternoons, the Sundays, and all. It only averages eleven hours.

Mr. HAY. They have time to get their meals, do they not? They are not on duty then?

Doctor CLARK. Yes; they have time to get their meals. The nurses are excused every morning some portion of the time to go to the nurses' home to tidy up their own rooms. It gives them from half to three-quarters of an hour of leisure to go out and do as they please. They walk slowly to the nurses' home, make their own beds, and go back to the ward again. They do that work instead of leaving it to the domestics. They would rather have the privilege of going to the nurses' home for three-quarters of an hour. I might add that the original plans of the institution called for a nurses' home for men, but Congress did not see fit at that time to allow the appropriation, and it was cut out; but in our present arrangement now, and in the scheme Dr. White has inaugurated, we hope to be able to furnish one of the unoccupied buildings for the men. It is occupied now by patients. We can take it and make a very comfortable nurses' home for men.

The CHAIRMAN. You do not know how the appropriations are expended, I suppose?

Doctor CLARK. No; I don't know a thing about that.

Mr. SMYSER. Doctor, how many old soldiers are out there?

Doctor CLARK. I would say in the neighborhood of 1,000; probably not quite that many.

Mr. SMYSER. They come from everywhere?

Doctor CLARK. Yes, sir.

Mr. SMYSER. They are usually consigned to the institution upon the order of the Secretary of War or the commandant of some military home?

Doctor CLARK. They are assigned there through the general—I have forgotten his name, but I think he is in New York.

Mr. HAY. You mean the chairman of the board?

Doctor CLARK. Yes; the chairman of the board of control.

Mr. SMYSER. I am going to be frank with you. I have heard a whole raft of complaints about the way these old fellows get there. What do you do by way of ascertaining whether a man consigned to you from Dayton, Ohio, ought to be in a lunatic asylum or not?

Doctor CLARK. We put them through the regular mental examination when they come in there. So far I have seen every man who has been admitted in the past two months. It will be a part of my business in future to examine those cases mentally.

Mr. SMYSER. How many have come in the last two months?

Doctor CLARK. I have not figured up for this month.

Mr. SMYSER. Approximately?

Doctor CLARK. In the month of April we had 30 in the men's department and about 19 women, making 49 admissions last month.

Mr. SMYSER. I am talking about soldiers.

Doctor CLARK. I don't know how to divide them. I think we got about 10 or 12 in one batch of old soldiers.

Mr. SMYSER. You examine them with a view of determining their mental condition?

Doctor CLARK. Yes, sir. I can say also that they are examined by the superintendent as well. He sees them the same week and goes over them mentally. He has a personal conversation with each one of those men, and we talk it over, four or five of us there together—Doctor White, Doctor Stack, Doctor Glasscock, and myself. We ask a man any question, and go over it, and talk on the side as to the probable form of insanity, the cause, etc.

Mr. SMYSER. That is what you do to ascertain their condition? When I say "you" I mean the institution.

Doctor CLARK. Yes, sir.

Mr. SMYSER. Doctor White and his assistants?

Doctor CLARK. Yes, sir.

Mr. SMYSER. Do you get any there who are not insane?

Doctor CLARK. No; I don't think so. We may get a few of these convalescent cases—these young Philippine fellows, who are under orders to come there—and by the time they get to St. Elizabeth's they frequently are pretty well straightened up. They are surveyed in short order and leave the institution. We are sending them out every day or two.

Mr. SMYSER. Do you keep any of the old soldiers there that have recovered?

Doctor CLARK. No, sir; we do not.

Mr. SMYSER. Or the younger soldiers?

Doctor CLARK. No, sir; we get rid of them just as fast as we can.

Mr. SMYSER. What do you do with them?

Doctor CLARK. We return them to their homes. Those men, especially the young soldiers, generally have a certain amount of allowance coming to them. They are sent to the city, and if their pay account is correct they draw their money. When they are all straightened up, they are discharged. Frequently they are discharged from the service also at the same time.

Mr. HAY. Doctor, have not some soldiers been gotten out of the institution by writs of habeas corpus?

Doctor CLARK. I believe they have; yes, sir.

MR. HAY. How many, do you know?

DOCTOR CLARK. No; I don't know. But I don't think it is a question in their cases of insanity at all. I think the question of commitment was the only point of order.

MR. HAY. But would they have been discharged if they had been found to be insane, when they were brought up on these writs of habeas corpus?

DOCTOR CLARK. I think we could have proven most all of those cases to be insane if that question had arisen.

MR. HAY. You do not think that question came up?

DOCTOR CLARK. It did not come up in the first cases at all. The judge decided on the matter of commitment alone, and the superintendent would not take the initiative to have those men committed. He did not think it was his duty, his place, to do it.

MR. HAY. Do you remember the case of a man named Loge?

DOCTOR CLARK. No; I don't remember that at all.

MR. HAY. What is the process when you ascertain that a soldier who has been sent there is sane? You send him back to the Home from which he was sent, do you not?

DOCTOR CLARK. They frequently go back to the Home. Some of them go back to their friends, if they have friends.

At this point Mr. Smyser took the chair as Acting Chairman.

THE ACTING CHAIRMAN. There is another class. I have had people talk to me and I have had communications, some signed and some unsigned, to the effect that you get people in there from the District of Columbia who are not actually insane. How about that?

DOCTOR CLARK. I think we can show that all those cases have had a regular hearing before a judge and jury, and the blame should be put on the jury and the judge for sending them there as much as upon us; but I don't believe that is a fact. As far as my department is concerned, I don't believe there is a patient who has ever been admitted there that was not insane, and I think that will hold good through the men's department also.

THE ACTING CHAIRMAN. That has no foundation?

DOCTOR CLARK. No, sir; I don't think it has.

THE ACTING CHAIRMAN. In fact, I mean.

DOCTOR CLARK. We have a few cases over there that are sent there on what we call a temporary commitment, in this way: The District has no provision to take care of an insane man. They have no city hospital that will take an insane person, and through the kindness of the superintendent he has agreed to take these people right on short notice, so that if they go to the White House and pick up an insane person they make a temporary commitment, and that patient is immediately taken over to St. Elizabeth's. Then, within a period of two weeks time—that commitment will hold good for a month, I think the law reads—and within a month they must have that patient regularly committed. Sometime during the month the case is called in court, and they are sent to court. Occasionally a few cases are not sent to court.

If, in our opinion—that is, in the opinion of the physicians who have charge of the case—it would be detrimental to that patient to appear in court, if he is physically unable to go to court, or too disturbed, too wild, and too noisy, we simply write the court a letter to that effect, making that statement that the patient will not be able to appear in

court as it will be detrimental to his condition. In the meantime the court sends out a special physician to examine that case a day or two before, and he will also make testimony that he saw that patient and the patient was too disturbed to be brought to court, or too low to be brought to court.

Then they go on and hear the case without the patient being present. That is where they get the idea that some are not present during their hearing. That was the case in regard to Mrs. Lochte. I don't think she went to court. She was too disturbed at that time. That is a request we have a great deal of difficulty in getting around. A majority of the friends of patients come over and beg us not to allow the patient to go to court, but if they are physically able, and it will not be a detriment to them, we require them to go.

The ACTING CHAIRMAN. So you are sort of between the devil and the deep sea. On the one hand they do not want the patient in court and on the other hand the law requires it, and if you should not send a patient there, then you are getting the devil. Is that right?

Doctor CLARK. Well, we stand that part of it, because we think we are working for the interest of the patient, so it does not react on us.

The ACTING CHAIRMAN. I will be frank about it. There has been a great deal said, and it has been intimated in the newspapers, and I have no doubt other gentlemen on this committee have received communications in regard to the matter. I want to know whether there is any foundation for any such accusation, that you people in charge of that institution are keeping inmates there who are not in fact insane.

Doctor CLARK. No, sir; there is no foundation for it at all.

The ACTING CHAIRMAN. Is that true of old soldiers, as well as persons from the District here?

Doctor CLARK. Yes, sir.

The ACTING CHAIRMAN. What would you do, Doctor, if you suspected the perpetration of a fraud by way of getting an inmate into that institution over there?

Doctor CLARK. I would try and show them up in some way if I possibly could.

The ACTING CHAIRMAN. Would you hold the patient there if you were satisfied a fraud had been perpetrated?

Doctor CLARK. We have this advantage during this interval. On the temporary commitment, if that patient recovers within two weeks, we can discharge the patient and telephone the court that the patient has recovered, and dismiss the proceedings. We do that occasionally. It is almost a weekly occurrence, after a patient is brought over there and has been under observation for two or three weeks, that when Dr. Hunt, in the city, comes out to survey the patient, he will see me and talk about the case, and I frequently say, "That patient, I think, is in pretty good shape," and he will so testify and they will discharge the patient.

Mr. HAY. Dr. Hunt, you say, is the name of the physician?

Doctor CLARK. Yes, sir.

Mr. HAY. He is appointed by the court?

Doctor CLARK. I think he is appointed by the court; yes, sir.

Mr. HAY. It is his annual duty to do this?

Doctor CLARK. Yes, sir; every week.

Mr. HAY. He is regularly appointed?

Doctor CLARK. Yes, sir; he is regularly appointed. It gives the patient this benefit. They are committed there to-day by two physicians, and in two weeks' time their condition may be entirely different, and Dr. Hunt surveys them at that time. He reports to the court the condition that day. The physicians who originally examined the patients have to go upon their examination two weeks prior to that.

Mr. HAY. Do you keep there a record of these various people who are sent there? Do you keep a record of the certificate of the physicians?

Doctor CLARK. Oh, yes, sir.

Mr. HAY. And the two freeholders.

Doctor CLARK. I don't think they have the freeholders. We keep the physician's certificate.

Mr. HAY. The law requires, as I understand it, the certificate of two physicians and two freeholders.

Doctor CLARK. We keep this record here. This is a medical certificate of the physicians.

Mr. HAY. So you do not keep the certificates of the freeholders?

Doctor CLARK. No; I think they keep that. I don't know about that.

The ACTING CHAIRMAN. You know, Doctor—I suppose it has been human experience—for the sake of property or various other reasons, it does happen that people sometimes want to get rid of other people who are in the way. Have you any such instances that you know of?

Doctor CLARK. I never have known of an instance of that kind.

The ACTING CHAIRMAN. Has it ever occurred, to your knowledge?

Doctor CLARK. It has never occurred in my experience at all.

The ACTING CHAIRMAN. Do you know of any instance since you have been out there where a patient has been kept there two years without having any sort of a hearing? I mean a patient coming from the District of Columbia, not an old soldier sent here from abroad.

Doctor CLARK. Not having any original commitment at all?

The ACTING CHAIRMAN. Yes.

Doctor CLARK. Never had a commitment of any character?

The ACTING CHAIRMAN. Yes.

Doctor CLARK. I don't recall any case of that kind.

The ACTING CHAIRMAN. Did you know one Florence Jordan out there?

Doctor CLARK. Yes, sir.

The ACTING CHAIRMAN. Where is she now? Do you know?

Doctor CLARK. She is discharged from the hospital as cured. She has recovered, has married, and is in Philadelphia.

The ACTING CHAIRMAN. How long was she an inmate?

Doctor CLARK. Fourteen or fifteen years altogether.

The ACTING CHAIRMAN. Do you know whether she was regularly committed?

Doctor CLARK. I don't know, sir. I only know this fact. I remember this circumstance. This Miss Jordan was a young girl, very young indeed. She was twelve or thirteen. She had quite a reputation about Washington and she was frequently brought into the police court. I think about the last time she appeared in the police court the judge—I can't state what police judge it was—gave her quite a lecture. Then he turned around and said: "I don't believe

this young lady is responsible at all for her acts." He said: "I am not going to commit her, but I am going to have her mental condition inquired into." He said: "I think she is morally not responsible for her actions at all." I believe at that time she was examined by physicians and committed to the hospital.

The ACTING CHAIRMAN. It is only fair to say that her case has been singled out and is the one giving rise to much of this criticism along the line about which I am interrogating you.

Doctor CLARK. I think that is the fact. I won't say positively, but I think that is the history of the case. I think she has a police record, and one of the judges had her condition inquired into at that time, when she was committed to the hospital.

The ACTING CHAIRMAN. It had its origin from the bench?

Doctor CLARK. Yes, sir.

The ACTING CHAIRMAN. By the judge before whom she appeared?

Doctor CLARK. Yes, sir.

Mr. HAY. Just along that line, Doctor, it has been testified to here or somebody has told me, or somebody has sent me a communication, asserting that there are patients there who have been cured of their insanity, but who have no homes, and there is nowhere to send them, and they are just being kept there because they have nowhere else to go. Is there any truth in that?

Doctor CLARK. That is not literally true. We have cases that we have to hold up quite a little while in order to locate them. It is pretty hard sometimes to get such people out. They prefer staying there rather than taking their chances in the world, and we continue them there for a little longer period.

I have a young lady there now just recovered from an acute attack of mental disease. She would be able to go away, but I think it would be rather stretching the case. I think she will do better if she stays there a month longer, as she might have a recurrence; but strictly speaking she could go to-day. I don't know where she will go when she goes out of there, and she doesn't know herself. I have told her she will probably, through her friends, have to get located and know where she is going before she goes out.

Mr. HAY. There was a long statement sent to me from some paper about Miss Corbett, and she appeared here and testified, and she struck me as being sane. Of course, I don't know whether she was or not. I would not attempt to say, but she certainly had that appearance on the witness stand. Do you regard her as a person who, by reason of her condition of mind, ought to be kept in the hospital?

Doctor CLARK. Yes, sir. We are on record with the statement that if anybody will come forward and guarantee to us that they will give that young lady a home they can take her, and when they do they could give her a trial, but she has no place to go. There are no friends at all who will vouch for her or take her out, and we will not turn her out on the world. We will not take that responsibility, because we consider that her mother and herself are both insane. The father committed suicide. The brother was insane and killed himself. Another daughter is insane in Staunton, Va., and these two patients are out here. They have a form of mental trouble. They make a very good impression. They are delightful patients.

I never had two more pleasant patients, but if you get them on their line of delusions they will show that they are insane. They are what are called paranoics. They have a certain system of reason-

ing with a certain logic to it, but they are unquestionably insane. For two years they lived in Washington, and the old lady never went out of the house at all. The daughter had plenty of opportunity to go out and assist herself and try to make a living for her mother, but she would not do it. They had delusions about their neighbors; that every move they made their neighbors watched them. They will tell you about that now. The church kept them for two years, and then their funds were running low and they did not feel they could be responsible for them much longer, and they had them committed to St. Elizabeth's. They have been in the best ward there since then.

They are both privileged. They go to the city when they please, come in and out alone, and conduct themselves very well. The old lady is getting quite ill. She has had an attack of hemiplegia since she has been there. She was completely paralyzed on one side, but she has cleared up; but she is getting old. The young lady might be able to do something. I don't know about that.

MR. HAY. But you do not hesitate to say they are of unsound mind and fit persons to be confined in an insane asylum?

DR. CLARK. Yes, sir; they had a second hearing. They had a writ of habeas corpus taken out before a judge, and testimony was taken, and he returned them to the custody of the institution.

THE ACTING CHAIRMAN. Doctor, I take it from what you have said it is one of the misfortunes of the institution to have these poor people there. Is there no infirmary in the District of Columbia where poor people are cared for?

DOCTOR CLARK. Yes; they have an infirmary here, I believe—the Washington Almshouse they call it.

MR. HAY. But proper attention could not be given at the almshouse to persons of unsound mind, could it?

DOCTOR CLARK. No; we get a great many patients from the almshouse. We get a patient or two every week from there, transferred from there to our institution.

THE ACTING CHAIRMAN. Is that because they are proper subjects to be there, and you have better facilities for looking after them?

DOCTOR CLARK. Yes, sir.

THE ACTING CHAIRMAN. And for no other reason that you know of?

DOCTOR CLARK. No, sir; no other reason at all.

THE ACTING CHAIRMAN. I suppose this is true. Out there, even while you might feel certain that a poor person has recovered from a mental disorder, unless there was some place or somebody to look after them, you would not just turn them adrift?

DOCTOR CLARK. Yes, sir; that is it exactly. We take a great deal of interest in locating our patients and getting them out and sending them to the city and letting them seek occupations and places. As soon as they get places we discharge them. We do that with quite a number.

THE ACTING CHAIRMAN. Now, another thing. We might as well look at things as they are. There is a good deal of complaint made about the retention of the old soldiers' pensions out there. How much of a fund have you on hand out there belonging to the old soldiers?

DOCTOR CLARK. I don't believe I could testify on that line at all. I know nothing about the finances of the institution. I would not

be able to qualify on that. I don't know a thing about the pensions. I have a few pensioners among the women. That is all I know. I don't know a thing about it.

Mr. HAY. That is wholly under the charge of the superintendent?

Doctor CLARK. Yes; that is under the charge of the superintendent. I have a matter here that I wish to speak about. I want to put in evidence the date of admission and death of Henry M. Temple. I think Mrs. Temple testified here.

The ACTING CHAIRMAN. Doctor, if you can fix from your record the date of his death, it may be all we will care for.

Doctor CLARK. Well, he died the 11th of December, 1902. That was before Doctor White took charge of the institution.

The ACTING CHAIRMAN. So she is evidently mistaken?

Doctor CLARK. Yes; her dates are entirely wrong, according to our records here.

Mr. WALLACE. Mr. Chairman, I have here a letter from the superintendent of the Illinois institution in regard to the eight-hour schedule. I would like to show it to the Doctor and have it read to the committee.

The ACTING CHAIRMAN. Very well.

Mr. WALLACE. It would save time to just let the Doctor read it.

The ACTING CHAIRMAN. Yes.

Doctor CLARK. It is as follows:

[Trustees: S. O. Spring, president, Peoria; E. M. Wayne, Delavan; K. M. Whitham, secretary, Aledo; superintendent, Geo. A. Zeller, M. D.; chief clerk, James E. Conway.]

ILLINOIS.

ASYLUM FOR THE INCURABLE INSANE.

1201 SOUTH BARTONVILLE,
Peoria, Ill., March 8, 1906.

CHAS. M. EMMONS, M. D.,

Secretary Medico-Legal Society.

SIR: I have the honor to acknowledge your letter of the 4th instant. I have never written a complete report on the eight-hour system, but will be pleased to quote the official order I posted at the time of its adoption in December:

"In the introduction of the eight-hour schedule the cooperation of the entire force of this institution is earnestly desired.

"The eight-hour law is as old as civilization. The good King Alfred, who, alone of England's illustrious line of kings, bore the surname 'Great' had three candles so gauged that they burned eight hours each. By this means he divided the day into three parts—one for work, one for recreation, and one for sleep. The world is supposed to have progressed since the days of that wise ruler, but in the matter of shortening the long hours of continuous duty of asylum employees there has been no change in a century.

"The adoption of the eight-hour schedule will call for the following assignment of the force:

"The morning attendants will have breakfast at 5.30 a. m. in the general dining room, and will assume charge of their respective wards promptly at 6 a. m., reporting for duty five minutes previous to that time. They will be relieved at 10 a. m. and will have dinner at 12 noon, and again assume charge of their wards at 2 p. m., remaining on duty until 6 p. m., when they will have supper and be relieved from further duty until 6 o'clock the next morning.

"The forenoon detail will assume charge of the wards at 10 a. m. and remain on duty until 2 p. m. During the noon hour they will see that the patients are properly served. They will not partake of the meal, and will remain on duty until 2 p. m., when they will have dinner in the general dining room. They will have supper at 5.30 p. m. and again assume charge of their wards at 6 p. m., remaining on duty until 10 p. m., when they will be off duty twelve hours.

"The night force will assume charge of the wards at 10 p. m. and remain on duty until 6 a. m.

"In consideration of the great reduction in the number of hours of continuous duty and the enjoyment of a four-hour and a twelve-hour interval it is expected that the eight hours spent upon the ward be devoted to actual work. For the same reason there will be no afternoons or evenings off.

"The forenoon detail of one week will become the afternoon detail of the next, thus affording all equal privileges.

"Employees will note that all their time still belongs to the State and that they must be present or accounted for every hour of the day or night. They are to hold themselves in readiness for extra assignments, for emergencies, such as the pursuit of escapes or to relieve in cases of sudden illness. It will be the practice to intrude as little as possible upon the time off duty, but as it can not be wholly surrendered to the attendant without serious embarrassment to the service it must be reserved by the State.

"The eight-hour schedule is introduced in order to relieve the tediousness and monotony of life on the ward and to avoid the deleterious effect of too long and constant association with the insane. The attendants will assemble in the office of the supervisor and supervisoress, respectively, fifteen minutes before the hour and proceed to the wards in proper order, and the attendants relieved will also proceed in good order to the employees' building and there disperse."

It is a success in every way and has not added six attendants to the force. The assignment of the force and the number of patients intrusted to each shift is also inclosed. We have a uniform scale of pay. All female attendants receive \$20 per month, and all male attendants receive \$27 per month. Each cottage has a head attendant, who receives \$25 per month. More than 600 of our male insane are cared for by female attendants.

Very respectfully,

GEO. A. ZELLER,

Superintendent.

P. S.—The increased time belonging to attendants has permitted us to abolish afternoons and evenings off. Sunday and church permits have also been abolished for the same reason. "Lates" are given twice a month. All substituting and detailing has been stopped, and we carry only the actual force needed to conduct the institution.

Cottage.	Number and class.	Cottage.	Number and class.
No. 1, A.....	60 mild women.	No. 1, C.....	125 mild men.
No. 2, A.....	60 women.	No. 2, C.....	120 men.
No. 3, A.....	60 women (noisy).	No. 3, C.....	Do.
No. 4, A.....	60 women (stupid).	No. 4, C.....	120 men (very violent).
No. 5, A.....	60 old ladies.	No. 5, C.....	120 women (untidy).
No. 1, B.....	60 epileptic men.	No. 6, C.....	120 women (very violent).
No. 2, B.....	60 infirm men (filthy).	No. 7, C.....	120 women (average).
Male hospital.....	68 sick men.	No. 8, C.....	120 women (detail workers).
No. 3, B.....	60 infirm women (filthy).		
Women's hospital..	40 sick women.	Domestic cottage.	66 workingmen.

Number of attendants and hours of service.

6 a. m. to 10 a. m.	10 a. m. to 2 p. m., and 6 p. m. to 10 p. m.	Night watch, 10 p. m. to 6 a. m.	Total.
1	1	1	8
1	1	1	8
1	1	1	8
1	1	1	8
1	1	1	8
3	2	2	7
3	3	2	8
3	2	2	7
3	3	2	8
3	3	2	8
3	3	1	7
3	3	1	7
6	2	1	6
4	5	4	15
4	3	2	9
4	4	3	11
2	2	1	5
2	2	1	5
1	1	1	3

Mr. HAY. What institution is that?

Doctor CLARK. The Illinois Asylum for the Incurable Insane, at Peoria, Ill.

Mr. HAY. In that connection, Doctor, do you think it would be a good plan to have a department at the hospital here for the incurable insane?

Doctor CLARK. We virtually have that at the present time. They are pretty well classified as to that now.

The ACTING CHAIRMAN. You have entered upon a system of classification?

Doctor CLARK. Yes, sir.

The ACTING CHAIRMAN. It is not complete, but you are completing it as rapidly as you can, is that it?

Doctor CLARK. Yes, sir; as rapidly as we can.

Mr. HAY. What do you think of this letter?

Doctor CLARK. While I read that over, I did not digest it very well.

The ACTING CHAIRMAN. Did this occur to you, that while they have eight hours a day, they have a man for twenty-four hours?

Doctor CLARK. It seems they are there all the time.

The ACTING CHAIRMAN. While they have shorter hours, they would be on hand all the time?

Doctor CLARK. It would seem they would have a crowd of idle people around the institution.

TESTIMONY OF DR. JOHN WESLEY BOVEE.

Dr. JOHN WESLEY BOVEE, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Will you give your full name, please?

Doctor BOVEE. John Wesley Bovee.

The CHAIRMAN. Doctor, are you connected with St. Elizabeth's Hospital now?

Doctor BOVEE. Yes, sir.

The CHAIRMAN. How long have you been there?

Doctor BOVEE. I really can't state the exact time. This staff was organized at the time Doctor Richardson was superintendent, and has been in existence since. During that time I have been all the time connected with it.

The CHAIRMAN. So that you have been there during all the time that Doctor White has been there?

Doctor BOVEE. Visiting occasionally whenever they called for me. I don't live there; I am not on the resident staff.

The CHAIRMAN. I beg your pardon. I was mistaken. Are you a practicing physician in the city of Washington?

Doctor BOVEE. Yes, sir.

The CHAIRMAN. How long have you been practicing here?

Doctor BOVEE. Twenty-one years.

The CHAIRMAN. During that time you have frequently visited St. Elizabeth's Hospital?

Doctor BOVEE. Yes, sir.

The CHAIRMAN. Have you visited it often since Doctor White became Superintendent in October, 1903?

Doctor BOVEE. Yes, sir.

The CHAIRMAN. About how often?

Doctor BOVEE. I can't state just how often. My visits have been irregular—when they have had patients for me to see. I am what might be called attending gynecologist over there, and when they have patients for me to see, I go and see them, and if an operation is necessary, I go to see them, and go back and visit them afterwards.

Mr. HAY. Your visits have mainly been in the female department?

Doctor BOVEE. Yes, sir.

The CHAIRMAN. And you have been called upon frequently to perform operations there?

Doctor BOVEE. Occasionally; yes, sir.

The CHAIRMAN. From your observation of the hospital as a visitor, when your professional duties called you there, what is your general opinion in regard to the care and treatment of the patients there?

Doctor BOVEE. My impressions were that the institution was splendidly managed, and that the treatment of the insane was of an advanced order.

The CHAIRMAN. Have you acquaintance with other insane asylums?

Doctor BOVEE. Not intimate. I have visited other insane asylums. I visited the State asylum, for instance, in Utica, N. Y., the old one, back when Doctor Gray was there.

The CHAIRMAN. Yes; I remember it very well.

Doctor BOVEE. And the Ogdensburg asylum and the Bay View Asylum, in Baltimore.

The CHAIRMAN. Do you think St. Elizabeth's compares favorably or unfavorably with those?

Doctor BOVEE. I really think it is a better institution than either of them—better managed.

The CHAIRMAN. Have you visited the other ones so recently that the comparison would be a perfectly fair one?

Doctor BOVEE. The one at Ogdensburg—not the other two.

The CHAIRMAN. How recently have you visited that?

Doctor BOVEE. Two years. I have a summer place near there, and I go over there in the summer.

The CHAIRMAN. The scientific treatment of the insane has advanced materially in the last ten years, has it not?

Doctor BOVEE. Yes, sir; I believe it has, very much.

The CHAIRMAN. Have you, by reading, or the knowledge that your profession would give you, acquired some knowledge in regard to the conduct of other asylums?

Doctor BOVEE. Yes, sir.

The CHAIRMAN. And knowing that, do you still make the same answer relative to the conduct of St. Elizabeth's asylum?

Doctor BOVEE. I do.

The CHAIRMAN. Did you ever have any occasion whatever to examine the food in St. Elizabeth's?

Dr. BOVEE. I have not.

The CHAIRMAN. Have the patients that you have operated upon been in the operating room at St. Elizabeth's at the time the operation too place?

Doctor BOVEE. Yes, sir.

The CHAIRMAN. That is an admirable operating room, is it not?

Doctor BOVEE. A very fine one; I think the best one in the District

of Columbia. I know it made me feel very badly to see them have such an operating room there, and I have to operate every day in much inferior ones in three other hospitals I belong to.

The CHAIRMAN. As far as attendants are concerned—I mean those who come in contact with you—do you think they are a satisfactory set of people, as far as you can judge?

Doctor BOVEE. I can't judge much of the male attendants. Some of their female nurses, for instance, I have trained myself. They graduated in training schools I am connected with, and I know them thoroughly well. For instance, one of their nurses was my head nurse for probably ten years before she went over there, Miss McLanahan. They have some other nurses I have trained there, and I know them so thoroughly well that perhaps my knowledge of their ability and character helps me to form a conclusion as to what the whole body is. I know they are most excellent.

The CHAIRMAN. In these cases where you have performed operations, have you visited the patient subsequent to the operation?

Doctor BOVEE. Yes, sir.

The CHAIRMAN. From your subsequent visits, have you any opinion to express in regard to the care of those patients after you operated on them?

Doctor BOVEE. It was perfectly satisfactory to me, sir.

The CHAIRMAN. In every instance?

Doctor BOVEE. And I am very critical.

The CHAIRMAN. That after-care of a patient after an operation has taken place is a very important matter, is it not?

Doctor BOVEE. It is.

The CHAIRMAN. I do not think there is any more to ask you about, Doctor. I think we will excuse you, sir.

Doctor BOVEE. I am much obliged to you.

The CHAIRMAN. I have here various letters from James W. Burroughs making charges against Maenche and referred to in the testimony of the witness, Quaid, which will be incorporated in the record.

The letters referred to are as follows:

ST. ELIZABETH'S, January 10, 1906.

Dr. WILLIAM A. WHITE,
Superintendent.

SIR: We, as laundry employees, appeal to you, asking an investigation into the conduct of El. L. Maenche, foreman of laundry.

His treatment of laundry employees has been shameful, especially the women, who he seems to take a delight in abusing.

It has for months been common talk of his entering the hospital grounds in an intoxicated condition.

We lay his abuse and neglect of business to this cause.

Persons on business have been unable to find him while he was sleeping in a dark room in the basement in an unfit condition for business. By looking into this matter you will learn more.

Trusting you will give this your kind attention, we remain, respectfully,

EVA WINDSOR,
ELIZABETH PROCTOR,
WILSON TYLER,
JAMES BURROUGHS,
Laundry Employees.

JANUARY 24, 1906.

Dr. W. A. WHITE, Superintendent:

I hereby prefer charges against E. L. Maenche of neglect of duty in not reporting Mr. Satterfield after refusing to let him off. after he deliberately remained off, leaving the wash room without a regular wash man, I being on a month day.

Second. With entering the hospital grounds in an intoxicated condition; with being under the influence of liquor while on duty in laundry.

Witnesses, 2 heads of departments, 1 doctor.

Witnesses on condition in laundry: Wilson Tyler, James Burroughs.

Third. With using language unbecoming an employee and gentleman toward clerks in Administration building. Witness: Odie Ball, J. Burroughs.

Respectfully,

J. W. BURROUGHS.

ST. ELIZABETH'S, January 27, 1906.

Dr. WILLIAM A. WHITE, Superintendent.

SIR: To prove my integrity, and show the true character of E. L. Maenche, foreman of laundry. I ask to be given an opportunity to prove beyond a question of doubt the charges that I have made against him.

Gross neglect of duty, as follows: Insubordination, couched in abusive language. Absence from duty without permission.

Second. Entering the hospital grounds in an intoxicated condition. Being on duty under the influence of liquor.

Third. Using language unbecoming an employee and gentleman toward administration clerk.

Trusting you will give me a chance to prove these charges and protect my honor in this case, I am,

Respectfully,

JAMES W. BURROUGHS,
Laundry.

ST. ELIZABETH'S, March 22, 1906.

Dr. WILLIAM A. WHITE, Superintendent.

SIR: I send you the names of two witnesses I wish you to examine in regard to the beating of patients in laundry.

Names of witnesses: Grace Tippet, Ollie Herbert.

Respectfully,

JAMES W. BURROUGHS.

The committee, at 3.15 o'clock p. m., adjourned until Monday, May 21, 1906, at 10 o'clock a. m.

HOUSE OF REPRESENTATIVES,

Washington, D. C., May 21, 1906.

The committee met at 10 o'clock a. m.

Present: Messrs. Olcott (chairman), Smyser, Barchfeld, Hay, and Wallace.

Also, Dr. William A. White, Mr. Stuart McNamara, Mr. R. P. Evans, and others.

TESTIMONY OF U. C. ROLLINS.

U. C. Rollins, being duly sworn, was examined and testified as follows:

Mr. SMYSER. What is your name?

Mr. ROLLINS. U. C. Rollins.

Mr. SMYSER. Are you connected with the hospital, Mr. Rollins?

Mr. ROLLINS. No, sir.

Mr. SMYSER. Where do you work?

Mr. ROLLINS. In the fire department.

Mr. SMYSER. Where—here in the city?

Mr. ROLLINS. Yes, sir; Company A.

Mr. SMYSER. Were you ever an attendant or anything else connected with the hospital?

Mr. ROLLINS. Yes, sir; I was an attendant there.

Mr. SMYSER. When?

Mr. ROLLINS. In 1904.

Mr. SMYSER. How long were you there?

Mr. ROLLINS. A little over two months.

Mr. SMYSER. What were your duties? What were you doing there?

Mr. ROLLINS. I was an attendant there for the insane.

Mr. SMYSER. In what ward?

Mr. ROLLINS. In White Ash ward.

Mr. SMYSER. How many assistants did you have?

Mr. ROLLINS. Do you mean how many attendants in the ward?

Mr. SMYSER. Yes.

Mr. ROLLINS. We had four.

Mr. SMYSER. How many patients?

Mr. ROLLINS. We didn't always have the same number of patients.

Mr. SMYSER. Well, generally.

Mr. ROLLINS. Usually about 22, as well as I can remember.

Mr. SMYSER. Were you in that same ward all the time you were there?

Mr. ROLLINS. Yes, sir.

Mr. SMYSER. What was the treatment of patients by attendants? How did they treat them?

Mr. ROLLINS. They was treated good.

Mr. SMYSER. Did you resign or were you discharged?

Mr. ROLLINS. I resigned.

Mr. SMYSER. Why?

Mr. ROLLINS. Because I got a better place.

Mr. SMYSER. What did you see during the time you were there of abuse of the patients, if anything?

Mr. ROLLINS. No; I didn't see any abuse.

Mr. SMYSER. None at all?

Mr. ROLLINS. No, sir.

Mr. SMYSER. Did you abuse them yourself?

Mr. ROLLINS. No.

Mr. SMYSER. Did you see any other attendants abuse them?

Mr. ROLLINS. No, sir.

Mr. SMYSER. Would you have tolerated such a thing?

Mr. ROLLINS. No, sir.

Mr. SMYSER. Did you sometimes have trouble with the patients?

Mr. ROLLINS. Yes; we had some patients that were more or less violent at times, but we usually had attendants enough there to handle them without any abuse.

Mr. SMYSER. Did you ever have to knock any down?

Mr. ROLLINS. No, sir.

Mr. SMYSER. Did you ever see that done?

Mr. ROLLINS. No, sir.

Mr. SMYSER. Or did you hear of such things while you were there?

Mr. ROLLINS. I heard of attendants being dismissed for such things while I was there.

Mr. SMYSER. What you know of that is what you heard?

Mr. ROLLINS. Yes, sir.

Mr. SMYSER. Were you in any other ward besides your own at any time?

Mr. ROLLINS. Only to pass through.

Mr. SMYSER. Did you see anything there by way of maltreatment?

Mr. ROLLINS. No, sir.

Mr. SMYSER. How old are you?

Mr. ROLLINS. Now?

Mr. SMYSER. Yes.

Mr. ROLLINS. I am 36.

Mr. SMYSER. How was the food while you were there?

Mr. ROLLINS. Well, the food sometimes was not so very good.

Mr. SMYSER. What was the matter with it?

Mr. ROLLINS. Sometimes the cooking wasn't very good, but I suppose it was as good as could be expected, considering the amount they cooked together there. It does not taste just exactly like the food a person would eat at home, always.

Mr. SMYSER. That, perhaps, could not be expected.

Mr. ROLLINS. No, sir.

Mr. SMYSER. Considering the number of people they had to cook for, and so on, what would you say?

Mr. ROLLINS. I think it was about as good as could be expected.

Mr. SMYSER. Do you know Maenche?

Mr. ROLLINS. No, sir; I don't know him. I suppose I may have seen him while I was there, but I didn't know him.

Mr. SMYSER. Would you have any hesitancy, if you do know of abuse of patients there, of telling it?

Mr. ROLLINS. Oh no.

Mr. SMYSER. You are not padlocked by anybody, are you?

Mr. ROLLINS. No, sir.

Mr. SMYSER. I do not care to ask him anything more.

Mr. HAY. Mr. Rollins, was there a man named Edgar Ball in the ward with you while you were there?

Mr. ROLLINS. Not at this time I speak of. I worked there at two different times.

Mr. HAY. At what time were you in the same ward with Edgar Ball?

Mr. ROLLINS. In 1898 and 1899, I think.

Mr. HAY. That was before Dr. White was superintendent?

Mr. ROLLINS. Oh yes; that was under Dr. Godding.

Mr. HAY. Mr. Ball testified to certain cruelties which took place there in 1904. You say you were not on the ward with him at that time.

Mr. ROLLINS. No, sir.

Mr. HAY. What ward were you on?

Mr. ROLLINS. White Ash.

Mr. HAY. When you were there this last time?

Mr. ROLLINS. Yes, sir.

The CHAIRMAN. Did you say you knew Ball?

Mr. ROLLINS. Yes, sir; I knew him.

The CHAIRMAN. Did you and he ever work on the same ward together?

Mr. ROLLINS. Not this last time I was there. In 1898 and 1899 I did.

The CHAIRMAN. But he never worked on the same ward with you while Dr. White was superintendent?

Mr. ROLLINS. No, sir.

TESTIMONY OF DR. ARTHUR C. FITCH.

Dr. ARTHUR FITCH, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Doctor, you are a practicing physician?

Doctor FITCH. Yes, sir.

The CHAIRMAN. Here in the city of Washington?

Doctor FITCH. At St. Elizabeth's.

The CHAIRMAN. You reside at St. Elizabeth's, do you?

Doctor FITCH. Yes, sir.

The CHAIRMAN. How long have you been there?

Doctor FITCH. I have been there since the 15th of October, 1904.

The CHAIRMAN. Did you go there after a competitive examination?

Doctor FITCH. Yes, sir.

The CHAIRMAN. Had you ever been connected with any institutions before then?

Doctor FITCH. I never held any permanent appointment at any hospital. I have done some substitute work in several hospitals around Washington, but not in hospitals for the care of the insane.

The CHAIRMAN. What hospitals do you refer to?

Doctor FITCH. I was a short time at Garfield Hospital during the summer of 1899. I have done quite a little dispensary work down at the Emergency, and for some little time I was at the Home for Incurables.

The CHAIRMAN. When did you graduate? When were you admitted to the practice of medicine?

Doctor FITCH. I graduated in 1903, and I registered here and took the board examination in the following January.

The CHAIRMAN. Where did you graduate?

Doctor FITCH. At George Washington University. It was the Columbian at that time.

The CHAIRMAN. You say you have been connected with St. Elizabeth since the 15th of October, 1904?

Doctor FITCH. Yes, sir.

The CHAIRMAN. What ward were you connected with?

Doctor FITCH. Until the 5th of April I was assigned as assistant to the physician who was in charge of Howard Hall department.

The CHAIRMAN. What class of patients are confined there?

Doctor FITCH. In that department we care for all the colored males and the criminal insane.

The CHAIRMAN. How many are there there?

Doctor FITCH. There are at the present time, I think, 350 some—about 360.

The CHAIRMAN. Is that about the average number?

Doctor FITCH. No, sir; it is a little below the average now. I think

that is the lowest number of patients we have had in that department since I have been there.

The CHAIRMAN. How many do you accommodate?

Doctor FITCH. The largest number was 386 since I have been there, I think.

The CHAIRMAN. How many distinct wards are there in Howard Hall?

Doctor FITCH. In the Howard Hall building there are eight—four on each floor. Then we have several other buildings in that department. In the Annex there are two wards, in the West Lodge three, and East Lodge is practically one ward. We have recently opened up a tubercular ward in one of the smaller buildings—one of the Dix buildings.

The CHAIRMAN. Were you and the principal physician in charge of all those patients in all those places?

Doctor FITCH. Yes, sir.

The CHAIRMAN. How often did you visit the patients?

Doctor FITCH. Either the physician in charge or myself, and sometimes both of us together—it was our custom to make rounds through the entire building once each day, in the morning. Then after that Doctor Toner, who was at that time the physician in charge, usually made a round in the afternoon. It was my custom, after having made the round in the morning, to busy myself about anything my attention was called to or that needed looking after, at any time during the day. My rounds were made after that, at irregular intervals.

The CHAIRMAN. Where were your sleeping quarters?

Doctor FITCH. In the old center building, the fourth floor.

The CHAIRMAN. How many attendants were there in the old Howard Hall?

Doctor FITCH. I looked that up a number of times. It varied from 42 to 48, including the supervisors, the one man we had walking the patients out, the dining-room men, and others serving there in various capacities.

The CHAIRMAN. You say this hall contains all the criminal insane, and also the colored males?

Doctor FITCH. The building there which has the designation of Howard Hall might be termed the prison building, and in that building are cared for all the criminal insane and all those having charges against them, and also a number of particularly vicious patients whom the other departments can not well care for in the other buildings.

The CHAIRMAN. You mean men who, since their confinement in St. Elizabeth's, have shown they are particularly vicious and have to be put over there?

Doctor FITCH. Yes, sir.

The CHAIRMAN. For care there?

Doctor FITCH. Yes, sir.

The CHAIRMAN. Doctor, do you know of any occasions when attendants have been accused of cruelty to any of the patients?

Doctor FITCH. Not in that department. I have been around that department a great deal at all hours, and I have never heard of any instance of cruelty or abuse to any of the patients in that department. In that class, where we have a particularly vicious lot of men, it would be the one building where rough handling might be expected;

but I have investigated a number of charges. Sometimes patients have told me that they have not been properly treated and I have often investigated, as has Doctor Toner, and, since he resigned, Doctor Schwinn, and we have never found any of the charges well founded.

The CHAIRMAN. How do you go about making an investigation? If a patient makes a charge of that kind, how do you go about the investigation?

Doctor FITCH. Whenever a charge of that kind is brought up in any way, the attendant whose name has been mentioned as being the party guilty of cruelty is brought into the office and we question him closely. Then we question the patients. Of course a great many times they can tell nothing about it. The patients can not be relied on. In addition to that, we endeavor to find out from others in the ward, other attendants, and in any way possible, whether there is any truth in the statements. As I say, I have never found any charges of that kind that have been well founded. I know of no instance of cruelty or abuse in that department since I have been there, and I don't think there have been any.

The CHAIRMAN. Have you ever seen any evidences upon the patients who make these charges of bruises, as if they might have come from bad treatment of any kind?

Doctor FITCH. A number of the patients in that department have at times borne bruises, but I have never found one that I believed to have been inflicted by any of the attendants.

Mr. SMYER. What made you think they did not come from an attendant?

Doctor FITCH. In that department we have a class of men, nearly all of them men who are without exception perfectly reliable. There is hardly a man in that department whose statement I would not believe under any and all circumstances; but in addition to that every charge, as I say, I have investigated, where I could, and I don't think any of the bruises I have seen there have been results of cruelty or abuse on the part of the attendants.

The CHAIRMAN. Have most of the attendants been there as long as you have?

Doctor FITCH. Oh, yes; the majority of the men in that department have been there a number of years.

The CHAIRMAN. They were there when you came there?

Doctor FITCH. Yes, sir. Since I have been there there have been a great many appointments. We found that the services of a great many who come there have not been satisfactory, and they would be discharged for various reasons, or given an opportunity to resign. There have been a great many changes in that way, but a number of the old men are still there.

The CHAIRMAN. Have any of the men, since you have been there, been discharged after the investigation of charges for cruelty?

Doctor FITCH. Yes, sir.

The CHAIRMAN. Who—what case was that?

Doctor FITCH. One man, a man named J. A. Taylor, was discharged. I don't remember the date now. It was a number of months ago. That was in East Lodge.

The CHAIRMAN. Is East Lodge part of this Howard Hall group?

Doctor FITCH. It is part of that group—one of the buildings in that department.

The CHAIRMAN. It is one of the buildings that is under your supervision?

Doctor FITCH. Yes, sir. In that building we care for the epileptics and a number of chronic dementia cases. We have one or two epileptics there and colored men of that class, and one night Doctor Schwinn, who at that time was night physician, was just coming out of a building just across the road, and he heard a disturbance up there and went up there. He found this man Taylor, who was not on duty at the time—it was during the night and he was supposed to be in his bedroom—had a patient down, and, I believe, slapped him or something of that kind. The patient was not injured at all, but he was immediately discharged, and the next day the superintendent had a warrant sworn out. He was brought into the police court and prosecuted for criminal assault. There have been a number of such cases.

Mr. SMYSER. Was he convicted?

Doctor FITCH. No, sir; I don't think there has ever been a single instance of a man having been convicted for an assault of that kind.

Mr. SMYSER. If these charges were well founded, what was wrong with the conviction?

Doctor FITCH. I think the usual trouble is that a jury got together here in Washington would not convict a man for some of the charges that have been brought against him for things of that kind in an insane asylum.

The CHAIRMAN. You mean because it is hard to prove?

Doctor FITCH. It is hard to prove, and a good many men will think a man is doing something of that kind in self-defense, or he is justified at times in using a patient a little roughly.

Mr. SMYSER. How do you account for that other great number who think you have been jumping on patients in every ward out there? How is it you get a class of jurors always who will not convict, when there are so many who have other views?

Doctor FITCH. That possibly is a little hard to explain, but at times it looks as if the man with the muck rake has been busy.

The CHAIRMAN. Do you know of any other case where a man has been discharged for cruelty?

Doctor FITCH. We had a young man named Pennington, who was at that time working as an attendant in the annex. It was during one of the meal hours—I think breakfast. The supervisor happened to be going through there, and he saw the attendant with a chair upraised as if he was about to strike the patient. He did not strike the patient at all. His explanation was that he simply did it to frighten the man. He was a dangerous patient, and he was somewhat afraid of him. He wanted the patient to be afraid of him, but he was immediately discharged.

Mr. SMYSER. Let me ask a little about this conviction. From your experience out there, when attendants are charged with maltreatment of patients and cruelty, the hospital undertakes to investigate, and does investigate?

Doctor FITCH. At all times; yes, sir.

Mr. SMYSER. And frequently discharges attendants. Is that right?

Doctor FITCH. I know of no instance——

Mr. SMYSER. One moment. That is right, is it?

Doctor FITCH. Yes, sir.

Mr. SMYSER. Now, in making their investigation that leads to the

discharge of the attendant, do you resort to all the evidence obtainable out there?

Doctor FITCH. Everything that we can ascertain bearing on the point.

Mr. SMYSER. Even taking the testimony of the patient himself?

Doctor FITCH. We always do.

Mr. SMYSER. Or of other patients?

Doctor FITCH. Yes, sir.

Mr. SMYSER. Is it true in the converse that when you prosecute one of those people for assault and battery, for instance, in the courts here the jury will acquit?

Doctor FITCH. Yes, sir; as I say, I have never known——

Mr. SMYSER. Do you go up against this proposition when you go to court, that some of these witnesses can not testify because they are inmates of an insane asylum?

Doctor FITCH. Well, I don't think the testimony of any of the patients over there would be received as evidence in a court of law.

Mr. SMYSER. Then, is this the situation, that in acting out there the superintendent, investigating, does listen to the stories of the patients, but here in court, in investigating that same charge, the court will not hear that testimony?

Doctor FITCH. No, sir; I have never known in any of those cases where any of the patients have been subpœnaed or summoned to appear.

Mr. SMYSER. The result is you do not get convictions in the criminal court?

Doctor FITCH. Yes, sir.

Mr. SMYSER. So I take it, you are sort of between the devil and the deep sea?

Doctor FITCH. A great deal of the time.

Mr. SMYSER. Do you discharge people out there maliciously?

Doctor FITCH. No, sir; we have never discharged a man without just cause.

Mr. SMYSER. Without what seemed to the management to be good and sufficient reason for his discharge?

Doctor FITCH. Yes, sir; in the interests of the hospital.

Mr. SMYSER. Can you name any other instance in which attendants have been discharged by reason of cruelty to patients, and when the case was presented in the criminal court here they have been discharged, not convicted?

Doctor FITCH. Yes, sir; one other case. I think the man's name was Hall.

Mr. SMYSER. Do you know Mrs. Carraher?

Doctor FITCH. I met her once.

Mr. SMYSER. Do you recall an instance in which she called attention to a person who was bruised and sprained—a doctor, perhaps her husband?

Doctor FITCH. Yes, sir; her husband is a patient in our building.

Mr. SMYSER. Do you recall having a conversation with her in which she called your attention to bruises and sprains, and you went off and consulted with an attendant and came back and said to her: "These things, you know, will happen; they come with the disease," the disease being paresis?

Doctor FITCH. No; I don't remember making any such statement

as that, but I remember the occurrence quite well. That was, I think, during the absence of Doctor Logie from the hospital last fall. I can't remember just the date. At that time he had an assistant, who happened to be out, and I was looking after the department.

They telephoned over for me to come over at once and see Doctor Carraher and also his wife in regard to some bruises that he had, I think on his hands and arms. I immediately went over there and saw Mrs. Carraher. That was the first time I had met her, and I don't remember having seen her since, although she is over there very frequently. Mrs. Carraher and I went in the ward. I asked the attendant about the case. I had often seen Doctor Carraher, this patient, when I had been over there, and knew the case quite well. So we went there and stood at the bedside. I talked with two of the attendants. I talked to them in her presence during the entire time I was there. I asked them some things about the case and told them what to apply. Then we came out. Mrs. Carraher walked to the door with me, and then I told her something about this case.

At that time he was quite feeble, in a condition of ataxia. He could not well walk around. He frequently attempts to get out of bed, and almost invariably tumbles down. He has had a number of very severe falls in that way and received numerous bruises one time. I don't know whether it was just before that or not. In falling he struck his arm, I think it was, against the adjoining bed and received a slight bruise. The man, as I remember it, has never received any severe bruises at all, and at that time there were no severe bruises. But Mrs. Carraher wanted something done immediately. She insisted her husband's wrist was dislocated, or something of that kind. I made a thorough examination of the man and told her that in that particular case it must be expected at times, owing to his feeble condition, that he would receive little bruises. She seemed to be perfectly satisfied. She thanked me for coming over, and I left. Everything said that day to the attendant was said in her presence. We held no whispered conversations or anything of that kind.

Mr. SMYSER. Doctor, on that occasion did you see anything there that indicated bruises or anything else that could be accounted for other than by infliction by an attendant?

Doctor FITCH. I don't quite understand the question.

Mr. SMYSER. Did you see evidences of bruises there that day when you were talking with Mrs. Carraher?

Doctor FITCH. There was a slight bruise on one of his eyes, I think.

Mr. SMYSER. How did you account for that?

Doctor FITCH. Just by tumbling around. Of course it might have come about in a number of ways.

Mr. SMYSER. It might have come about from a fist?

Doctor FITCH. It might have, but I don't believe it did.

Mr. SMYSER. From your investigation, what conclusion did you reach at that time?

Doctor FITCH. Just what I told her—that bruises could have come, in my opinion, in no other way than simply the man's own inability to walk around.

Mr. SMYSER. Was that your honest opinion at that time?

Doctor FITCH. That was my honest opinion, and still is.

Mr. SMYSER. Was there any effort to conceal the fact from this lady?

Doctor FITCH. None at all.

Mr. SMYSER. Was there any object or motive in concealing it?

Doctor FITCH. Not at all. I explained his condition to her thoroughly and talked with her quite a long time. Mrs. Carraher seemed perfectly satisfied at that time with the explanation.

Mr. SMYSER. Did she make any complaint there such as she has testified to here?

Doctor FITCH. No, sir. When I first went there, she seemed to be somewhat irritated and thought her husband was not receiving proper care, and a few matters of that sort; but I think she was thoroughly satisfied with my explanation. That has been a particularly troublesome case.

Mr. SMYSER. Why so?

Doctor FITCH. He is a paretic and not able to walk well. He is almost constantly, during the day and frequently at night, attempting to get up and walk about the wards. He has a number of times disturbed the other patients. He has gone to them and attempted to get in beds with other patients, pulling the covers off them, annoying them. Very frequently the patient becomes injured in that way by other patients in the ward. It is almost an impossibility to be constantly watching individual patients. Those little accidents are bound to occur. They will occur in any hospital.

Mr. HAY. Doctor, if an attendant has the disposition to treat a patient cruelly, is there any possible way by which the authorities can keep guard over him, so that at times he may not be able to carry out any disposition he may have of that sort?

Doctor FITCH. I don't suppose that could be done; no, sir. I suppose there might be occasional cases of abuse and cruel treatment, and all that sort of thing, that we never could find out.

Mr. HAY. Some of these cases may be true, and yet the authorities not be responsible for them.

Doctor FITCH. Yes, sir. It was brought out in the testimony of a number of the laundry employees, who say those abuses have been going on there from time to time. Those men who testified stated that they reported, and that was not true. That was the first time I heard anything about it.

Mr. HAY. No report had been made up to the time the statement was made here.

Doctor FITCH. If any member of the staff had ever heard anything about those, if those were facts, those men would have been discharged at once.

The CHAIRMAN. Doctor, do you know anything about a man there by the name of Sam A. Tyler, who was sometimes called Sampson Tyler?

Doctor FITCH. Samuel A. Tyler; yes, sir. I think it was Samuel A.

The CHAIRMAN. What do you know about him?

Doctor FITCH. He is a colored man, at present in the east lodge, and also a paretic. During the time he has been there he has had a number of very severe convulsions. When he came there, he was a man who was noted for his great strength. He was a local pugilist and a man who had received a good many bumps before he came there. Of course that may be hearsay evidence, but I have heard about his prowess a number of times.

The CHAIRMAN. He is a discharged soldier, is he not?

Doctor FITCH. I don't think Tyler is a soldier. His occupation, some time previous to coming there, I think, was with the pound master, the dog catcher.

Mr. HAY. Did you ever hear anything about a friend of his by the name of Lacy, visiting him and complaining that Tyler had some black eyes and generally was used up?

Doctor FITCH. I never heard of any of those complaints until I saw the testimony in the Washington Post. I know that Tyler has had a number of black eyes, and very black ones. He received two one day in an altercation with an epileptic, a powerful fellow there in the same building, by the name of Dorsey. I don't know whether it was on that occasion or not, but Mr. Dorsey broke one of the metacarpal bones in his right hand. He is a vicious fellow; and Tyler several times—I won't say several times, but I do say once, during a convulsion, received an injury to one of his eyes in falling, that resulted in a black eye. In that way there is trouble with other patients. I know he has received injuries at other times, and it has been almost absolutely impossible to prevent it. He has been isolated. He had to be restrained at times.

Mr. HAY. How have you restrained him?

Doctor FITCH. I think we have never had anything on him but straps.

The CHAIRMAN. You mean the wristlets or cuffs, or whatever you call them?

Doctor FITCH. Yes, sir.

The CHAIRMAN. Those consist of what material?

Doctor FITCH. Leather. In one end of this cuff is a heavy metal staple running across in this direction [indicating]. In the other end there is just a slot in the leather. It is adjustable. There are a number of these holes. It is clamped around the wrists, and fits the wrist so that the hands can not be drawn through. Then the strap is passed right through the staple, which prevents it coming off. It is passed around the waist and buckled in the back, or locked, in some cases.

I believe at that time Lacy spoke of his wrist being bandaged. During the winter of 1904 and 1905, Tyler had a lot of abscesses. He had one just over the right ear and one on the lip here, which perforated the lip, which resulted in a salivary fistula, which finally healed, and he also had one on the left wrist. We treated that for a long time, and he carried that wrist in a bandage for, I think, probably, two or three weeks. Whether that was the bandage to which Lacy referred I don't know.

There is one statement I noticed by Mr. Spencer Herbert concerning having seen a colored man wrung out, or something of that kind, over in P building in July, 1905. There were no colored people in that building at that time. This man Tyler, was at one time in the P building, and it was at a time when he was particularly active. He succeeded in breaking thirteen of the large window panes there one day and doing other damage, and he with all the other colored patients were moved to East Lodge, on, I think, the 13th of October, 1904, just two days before I went over there.

The CHAIRMAN. Did you ever hear any complaints made by any-

body of attendants choking patients, getting behind them and putting their knee in the small of the back?

Doctor FITCH. We have heard a number of such things. We hear of it constantly.

The CHAIRMAN. Did you ever investigate those?

Doctor FITCH. I have; a number.

The CHAIRMAN. Did you ever find any of the attendants had been guilty of such practices?

Doctor FITCH. I never have been able to prove it on any of them. I admit it might have been done, but I have never been able to prove it. I don't think there is much truth in those statements.

The CHAIRMAN. How about this toweling? Did you ever hear complaints of men being choked with a towel?

Doctor FITCH. That is another tradition that is very frequently spoken of. I admit it may be done, but if it is we simply can not find out those things. We never can prove them, but I don't believe that thing is a method of practice over there, commonly used.

Mr. HAY. Doctor, how do you account for the fact that complaints are made of specific cases of that sort? If it was a general complaint of bad treatment I could understand it, but the process is described in each case. If it is not done, how do you account for the complaints?

Doctor FITCH. I can not make any attempt to account for it.

The CHAIRMAN. Doctor, what about the food there in the asylum? What is your opinion of that?

Doctor FITCH. The food is good as a rule. There may be times when it does not look particularly inviting. It can not, cooked and served the way it is in large quantities, but I am thoroughly satisfied as to the quality of the food all the time. There have been times when the food has not been properly cooked, when they have been rushed there in the general kitchen or the other kitchen. Several times I have been over there at Howard Hall when the meals would come over and were served up at the table, and I did not feel particularly hungry when I saw it, but notwithstanding the appearance is not all it might be, the food is certainly nourishing and good.

The CHAIRMAN. Is it part of your duty to inspect the food?

Doctor FITCH. I remember frequently looking over the meals when they come in. I always do it when I happen to be there at mealtime, and I frequently go in at mealtime for the purpose.

The CHAIRMAN. Did you ever know the meat to be spoiled? Did you ever know of an instance of that kind?

Doctor FITCH. I have never known that to be the case. I have known many times when the meat possibly was not properly cooked. In that department we get all the food from the general kitchen, the large kitchen. It is sent around on cars from the general kitchen, around to the west side in the basement, and then carried through a tunnel to Howard Hall and up in the elevator, and frequently, in cold weather, and at other times the food would be pretty well chilled.

The CHAIRMAN. Do you have no separate buildings where the food comes from a considerable distance, with warm tables or steam tables in the service room?

Doctor FITCH. I think they did have something of that kind in

some of the buildings where the female patients were kept. There is some kind of a box, or something of that kind, that was devised for the purpose, but we have nothing of that kind in our department.

Mr. SMYSER. Do you kill any cattle over there?

Doctor FITCH. None at all.

Mr. SMYSER. You do not raise any animals?

Doctor FITCH. Only hogs. We raised hogs the first year I was there. I think there were some 300 or more hogs at that time.

Mr. SMYSER. Where do you get your meat?

Doctor FITCH. I think Armour and Swift and those companies furnish it. I have seen the sides of beef come in there, but I couldn't say now where the beef is bought.

Mr. SMYSER. It has to be imported from some place, I take it?

Doctor FITCH. Oh, yes; we have no home production there. We have a large poultry yard. A number of chickens served are raised on the place, and we get a great many eggs.

Mr. HAY. How often are eggs served to the ordinary patients, outside of the hospital wards that are set aside for sick patients?

Doctor FITCH. I really don't know whether there is one regular day for eggs or not.

Mr. HAY. You say you have inspected the food frequently. How often have you seen eggs when you inspected?

Doctor FITCH. I couldn't state how many times, except where those who are sick are put on special diet, or in our hospital wards.

Mr. HAY. You do not recall having seen eggs at any time?

Doctor FITCH. Yes; I have seen once or twice, in Howard Hall, at our table.

Mr. HAY. You have on one or two occasions?

Doctor FITCH. Yes, sir; but I couldn't say whether there is any regular day for eggs or not.

Mr. HAY. Somebody testified here they used 300 gallons of milk a day?

Doctor FITCH. About 300 gallons of milk a day.

Mr. HAY. How much milk do these ordinary people get in Howard Hall?

Doctor FITCH. The Howard Hall men get none, unless there is some special reason for giving it. Regularly, none of the Howard Hall patients get it.

Mr. HAY. How many are there in that ward do you say?

Doctor FITCH. In Howard Hall there are at present 135 or 140.

Mr. HAY. But the number who take their meals in this large dining room is about 500, is it not?

Doctor FITCH. In our department, do you mean?

Mr. HAY. Yes, in that common place down there. I don't know which department it is.

Doctor FITCH. You mean the general dining room?

Mr. HAY. Yes.

Doctor FITCH. I couldn't tell just how many there are. This morning at the first breakfast there were 52 fed. There are two breakfasts there.

Mr. HAY. When the committee was over there we went into a large dining hall.

Mr. FITCH. That must have been the general dining room, I presume.

Mr. HAY. They told us there were about 500 at the table.

Doctor FITCH. That was in the detached buildings. Oh, yes; there are about 500 meet there.

Mr. HAY. You say these people in Howard Hall do not get any milk except when they are sick?

Dr. FITCH. Only at times. If a man happens to ask for milk and we have a sufficient quantity there not devoted to those in the sick ward, in hall 1, we might give it to him. At times I have made out an order for a certain patient to be given milk for a specified length of time; but it is not a part of the regular diet in Howard Hall.

Mr. HAY. How many people do you have under your care at a time?

Dr. FITCH. During the time I was in that department it varied.

Mr. HAY. I mean under your care at the present time. I do not mean in that department.

Dr. FITCH. I am acting night medical officer now.

Mr. HAY. How many people do you have to care for?

Dr. FITCH. Everybody in the grounds.

Mr. HAY. Everybody in the whole grounds?

Dr. FITCH. Yes, sir.

Mr. HAY. Do you find you have time to do that?

Dr. FITCH. Yes, sir; it is very seldom at night that one physician can not attend to everything that comes up.

The CHAIRMAN. That is, for about 350 or 360 patients, do you mean?

Mr. HAY. Oh, no; the whole number—2,500 or more.

Dr. FITCH. The night medical officer looks after the institution at night.

Mr. HAY. Are there not some physicians under you?

Dr. FITCH. No, sir.

Mr. HAY. In charge at night?

Dr. FITCH. No, sir.

Mr. SMYSER. Take last week; were you on duty at night last week?

Dr. FITCH. Yes; from 9 p. m. to 7 a. m.

Mr. SMYSER. What were the average calls last week, say?

Dr. FITCH. Possibly I have 20 or 25 calls during the night. I might explain something about the methods that we are following there in regard to the care of patients at night.

Mr. BARCHFELD. Certainly. Tell us all.

Doctor FITCH. I go on duty at 9 o'clock. Then I get a telephone message soon after I go on, soon after 9 o'clock, from the young man who is head charge nurse in B building. There are four wards there. Each ward has a night attendant. Mr. Carey has charge of that building. He makes rounds every hour or more frequently. He is on the go around through those four wards all the time. He calls me up at 9 o'clock, states the condition of the patients and tells me anything that is needed in the way of treatment, douches, or anything of that kind. That is by telephone. I issue such orders as I wish him to follow. Then I have a telephone message from the nurses in charge of the different wards in B building and also from M building. There is a night attendant there, if there is anything needed. Then I hear from the other buildings as emergency arises, or anything of that sort, so that I keep in touch with all those buildings; but I always hear from the hospital wards where there are any acute cases right after I go on duty.

A night supervisor looks after the detached buildings. There are in that group, I think, nine or ten men on night duty. This supervisor makes rounds through the buildings. He is going around through those buildings during the entire night. He reports to me at 12 o'clock and at 6 in the morning in person, then by telephone anything that arises. Recently there have been no particularly acute cases. We have a man who makes rounds through the annex and Howard Hall building. There is one night attendant in the annex, a night attendant, sometimes two, in the two particularly noisy wards in Howard Hall. This supervisor is in addition to those two men. He makes rounds through the buildings at regular intervals, reports to me from time to time anything that is needed there, and reports in person at 12 and at 3. At one time we had a female night supervisor, but that position has been dispensed with since they inaugurated the system of calling up from the different wards at regular intervals.

Across the road there are four buildings. There are, I think, about 10 men over there on night duty, one trained nurse in charge, a very capable man. He reports to me usually at 9 o'clock, and more frequently during the night when he is making his rounds and discovers anything needing our attention. Then there is another watchman who makes rounds simply through the west side alone. He reports to me usually about half past 9. Those are all chronic cases in there, and there are only one or two wards in which medicine is being given at the present time. Then there is another night watchman who goes through west lodge, besides all those wards there, and some of the other buildings about the grounds, and reports to me, and these men I have just spoken of report to me in person every hour.

That disposes of reports. Then, as soon as I have heard from all the wards, I get on my wheel and make rounds. I always visit the acute wards and, as occasion requires or as I have opportunity or time, I visit the chronic wards.

MR. HAY. When the time comes for you to make these rounds is there anybody in there to respond to any calls which might be made?

DR. FITCH. Oh, yes, sir.

MR. HAY. You have a clerk or somebody?

DR. FITCH. Yes, sir. If an emergency arises with which any one man is unable to cope the physicians are called from the other departments. They are all accessible by phone.

MR. HAY. What other duties do you perform besides these you have detailed? Do you have to look out for the various people who are out of the grounds, to see what time they come in, and so on? Do you have anything to do with that?

DR. FITCH. The supervisor in the detached buildings has charge of the keys of the men who are out during the night on that service. He has the book, with a list of all who are out, and he makes a note of the time. All the female nurses who are out report to me. They have to come to me to get a key to get in the nurses' home. I keep track of that. Mr. Hodges, who is in Howard Hall, has charge of those keys, and Mr. Corbin of the west side keys.

MR. SMYSER. Your rule, I suppose, is that patients retire at a given time?

DR. FITCH. Yes, sir.

MR. SMYSER. What is the hour?

Dr. FITCH. About seven o'clock in most of the buildings—7 to 8 o'clock.

Mr. SMYSER. Ordinarily you have about 2,500 or 2,600 people there?

Dr. FITCH. Yes, sir; 2,560—some at the present time.

Mr. SMYSER. And, ordinarily, with the retirement of that number of people, how many do you expect to remain quiet until morning?

Dr. FITCH. Possibly I could answer that question better by telling you how many I expect not to be quiet.

Mr. SMYSER. Well, put it in that way.

Dr. FITCH. Possibly some 25—anywhere between 25 and 50, I mean—during the night out of that entire number. I may say that since I have been on night duty there has not been an accident worthy of notice. There has been no injury received that was serious, and only two injuries that required any medicine or any surgical dressings or anything of that kind.

Mr. SMYSER. What I want to get at is whether you are able to make the round?

Dr. FITCH. I have been at the present time.

Mr. SMYSER. How old are you?

Dr. FITCH. Thirty-nine.

The CHAIRMAN. Do you think there are a sufficient number of attendants in Howard Hall?

Dr. FITCH. In Howard Hall I would like to have seen possibly two more attendants, owing to the fact that in our department we have more men working out; that is, in proportion to the number of patients we have more men working out than they have in other departments, and we have required two or sometimes three extra attendants to take charge of the gangs engaged in the various works about the grounds, the power house, and various places. Those men can then relieve in case of emergency, if a man is taken sick or anything of that kind, and also when men are away on vacations. Oftentimes on a rainy day the men are kept in, and any time when it is not necessary for the men to be out, or for any particular amount of work to be done, those men take their places in attendance on the ward. In that way we always have a sufficient number of men in Howard Hall wards or any wards where we need competent men, in a sufficient force. I may say that there has hardly been a time since I have been in Howard Hall when we were really short of help.

We have nearly always had a sufficient number to get along comfortably. At times the men in the department have had to work a little overtime, but as a rule we have had sufficient men. With some such arrangement as that I do not think we would ever have any trouble. We have had trouble in getting the kind of men we want for that ward, because the superintendent made a rule that a man taking a position in Howard Hall must be of a certain height and a certain weight. We do not want any little men there, and we can not always get just the kind of men we would like to have in my department.

Mr. SMYSER. Terry McGovern is a little fellow, you know.

Dr. FITCH. But we do not allow his method of treatment over there. [Laughter].

Mr. SMYSER. Oh, I just wanted to know.

The CHAIRMAN. How long are the attendants on duty in Howard Hall?

Dr. FITCH. They are on duty from 6 o'clock in the morning until 8 o'clock one night in the week; next night they are on from 6 o'clock in the morning until after tea, as we call it. Sometimes they get away at about five o'clock, and usually before that. On their nights off they are allowed to stay out until 10 o'clock, and one night in the week until 12 o'clock; and they have every third Sunday, every third holiday, and fifteen or eighteen days vacation during the year. Then they have a half day off every week, or one whole day every two weeks.

The CHAIRMAN. When they are off in that way they are at liberty to leave the grounds?

Dr. FITCH. Yes.

The CHAIRMAN. And they can go wherever they choose?

Dr. FITCH. Yes. The men who are not excused and out are supposed to be in their rooms after they go off duty. In some wards we compel them to do that.

Mr. HAY. What do you think of the eight hours system, by which they are employed eight hours at a time?

Dr. FITCH. I do not think it is feasible over there. I think it is impracticable. I do not see how we could put such a scheme as that into operation. I have noticed particularly that in those wards where we do not have regular men, men with whom the patients are acquainted, we have more or less trouble. The patients there become acquainted and oftentimes attached to their attendant, and when that attendant is changed——

Mr. HAY. Could they not become attached to these other attendants?

Dr. FITCH. An insane man does not usually transfer his affections as a man does who is not insane.

Mr. HAY. If the attendant is on duty eight hours a day they would see a good deal of him, would they not?

Dr. FITCH. I presume so; but I think if we had the eight hours system—I may be wrong—we would simply have that number of raw men to get, and we would have quite as much trouble getting them, and would have just as many unsatisfactory men, and the changes in the force there would be a great deal more frequent.

Mr. HAY. You say you have been in a general hospital here in the city?

Dr. FITCH. At times.

Mr. HAY. How long do the attendants there work?

Dr. FITCH. I could not tell you about that. I really do not remember.

Mr. HAY. Do they work as long as fourteen hours at a time, any of them, or twelve hours?

Dr. FITCH. I think so.

Mr. HAY. Do they not work ten hours a day?

Dr. FITCH. I could not say positively; I do not know.

The CHAIRMAN. When a man is off at night until 10 o'clock, suppose he comes there after his time. How does he get in? Does he have to make a report to anybody of being late?

Dr. FITCH. He can only get his key from the watchman who is usually at the gate or the entrance to the particular building or group of buildings. They all have to go to a certain building to get

the keys. The man who is in charge, the night supervisor or the head night watch, has all the keys for that particular department, and there is no other way of getting the keys. If they do not happen to be around at 10 o'clock they have to wait until 11, until the night watch goes around on his next round.

The CHAIRMAN. He is at this particular place where they go to get the keys at 10 o'clock, and he is not there again until 11 o'clock?

Dr. FITCH. For instance, the men at the detached buildings all get their keys of one man, at one place. The Howard Hall men all get their keys of the night watch there. The west side men get their keys of Mr. Corbin, who is the night watch on that side. Over across the road they all have to go to the R building, I think, and get their keys there.

The CHAIRMAN. If a man does not get his key at 10 o'clock, he has to wait until 11 o'clock to get it?

Dr. FITCH. Or until he happens to see the night watch.

Mr. HAY. Doctor, have you any ideas or suggestions to make as to how the food could be improved in the way of bringing it to the dining room, in the way it is served, so that it will not be chilled, which necessarily makes it disagreeable to the people who eat it? Do you know of any way in which that could be obviated?

Dr. FITCH. I do not, unless we had some special car or something of that kind, or have kitchens for each department or each building. That would make an enormous amount of trouble and expense.

Mr. HAY. How is that?

Dr. FITCH. It would be an enormous amount of trouble and a great deal of expense, if we had separate kitchens for the different buildings or different groups of buildings.

Mr. HAY. In these buildings is the food ever properly warmed when it is served to the patients?

Dr. FITCH. Yes, sir.

Mr. HAY. How often?

Dr. FITCH. The majority of times when the food is served it is warm, except in very cold weather. These cars run through tunnels or covered passageways all the way around to the various buildings.

Mr. HAY. How long does it take to get the food from the kitchen and place it on the table before the patients are called upon to go to the table? I suppose first you have to put it on the cars in the kitchen?

Dr. FITCH. They send it on the elevator down to the tunnel, and then to the various buildings.

Mr. HAY. And after it gets to the dining room it has got to be put on the table?

Dr. FITCH. Yes.

Mr. HAY. I understand you have in one hall there 500 people. How long would it take to put the food on the table for 500 people?

Dr. FITCH. In that dining room the kitchen is right adjoining the dining room.

Mr. HAY. It is?

Dr. FITCH. Yes; the food is carried right in from the kitchen.

Mr. HAY. How long does it take to place the food on the table at these other places where the kitchen does not adjoin the dining room?

Dr. FITCH. Howard Hall is, I think, the building that is farthest

removed from the kitchen on that side. They ought to be able to get it up on the table in probably fifteen minutes, shoving the cars pretty lively.

Mr. HAY. From the time it leaves the kitchen until the patients are called upon to eat it, it is a quarter of an hour?

Dr. FITCH. It may be a little longer than that, and possibly they could get it on the table a little sooner.

Mr. HAY. It would get pretty chilly in fifteen minutes, would it not?

Dr. FITCH. Of course if you are out in the cold——

Mr. HAY. No, not out in the cold; anywhere. Food that is put on the table and allowed to stand for fifteen minutes before you eat it can not be very warm, I should not think. I do not know. Take Howard Hall, for instance. Do you not think it would be a good thing to have a kitchen for that place? Ought there not to be a kitchen for that place in that group of buildings?

Dr. FITCH. For the purpose of keeping the food warm——

Mr. HAY. Not only for the purpose of keeping the food warm, but would not the food be much more palatable?

Dr. FITCH. In that one respect; it might be warmer.

Mr. HAY. But otherwise it would be the same?

Dr. FITCH. Yes, sir.

Mr. BARCHFELD. How long have you been connected there, Doctor?

Dr. FITCH. Since the 15th of October, 1904.

Mr. BARCHFELD. Where were you formerly?

Dr. FITCH. I held temporary appointments in some of the hospitals here.

Mr. BARCHFELD. You were in private practice previous to going to this institution?

Dr. FITCH. No; I graduated in 1903.

Mr. BARCHFELD. You are now the night medical officer.

Dr. FITCH. Yes; I act in that capacity.

Mr. BARCHFELD. How long have you been there in that capacity?

Dr. FITCH. Since the 5th of April, the 5th or 6th, I think—last month.

Mr. BARCHFELD. Last month?

Dr. FITCH. Yes.

Mr. BARCHFELD. You are employed to properly see all the cases that are brought to your attention that require your medical or surgical services in the night, are you not?

Dr. FITCH. Yes, sir; I have been so far.

Mr. BARCHFELD. You are not worked to death, are you?

Dr. FITCH. No, sir.

Mr. BARCHFELD. You do not complain?

Dr. FITCH. I have not made any complaint as yet.

Mr. BARCHFELD. These cases are all under medical supervision during the day?

Dr. FITCH. Yes.

Mr. BARCHFELD. And you are simply called in in case of an emergency at night?

Dr. FITCH. Yes.

Mr. BARCHFELD. And that examination that you possibly give the patient is merely a superficial or perfunctory examination, is it not? If you are called in to see Mary Jones with a pain, they tell you that

Mary Jones is a sufferer possibly from pneumonitis or pleuritis, and you give something to relieve the pain; is not that true?

Dr. FITCH. I first examine Mary Jones.

Mr. BARCHFELD. Yes; I understand. But you do not go into the analysis of that sputum or an analysis of that urine?

Dr. FITCH. No; and I would say in addition to what I have already said about the different attendants reporting to me, that I receive reports from physicians in charge of each department when I go on duty. They tell me of any new admissions during the day, any change in the condition of the various patients, and any particular case that they want me to look after and give particular attention to.

Mr. BARCHFELD. What I want to bring out is the fact that you as one man and physician and surgeon are able and competent, and not harrassed by the extraordinary work imposed upon you, to do the work that is required.

Dr. FITCH. Not at all. The work is so arranged at the present time, and the method used is such that one man can look after the work very nicely without working too hard. In addition to that, in case of an emergency we are right attached to the other physicians if we need assistance.

Mr. WALLACE. Is there ever any patient admitted there who is not insane?

Dr. FITCH. We have had some cases in our department, in Howard Hall.

Mr. WALLACE. Where they were not insane?

Dr. FITCH. Yes, sir. I can call to mind at least three cases.

Mr. WALLACE. Will you give them, please?

Dr. FITCH. I can give the name of one, Lanier, who came as a general prisoner to us from a military post, I think at Sioux Falls. He came there with a most remarkable delusion of personal debility and that sort of thing, but it was quite too palpable. He had a rather short sojourn with us and went back. Another case was that of Robert Lingquist, who was also a military prisoner. In course of time he was reported back to the military authorities and sent from our place to Fort Plain, N. Y. I can not recall the name of the third case, but he was also a general prisoner. I think in that department we probably get a larger number of cases of feigned insanity than any other, and possibly it is the only department in which there are admissions of that class of people.

Mr. WALLACE. You spoke of seeing patients there with bruises on their faces, or hands, etc. Who are there to commit those abuses?

Dr. FITCH. There are many combative patients.

Mr. WALLACE. I mean other than the patients. Are there any attendants?

Dr. FITCH. No, sir.

Mr. WALLACE. It is often the fact that you can not tell whether the patient has abused himself or whether he has been abused by someone else?

Dr. FITCH. Apparently you can not tell, no, sir. We are usually pretty well satisfied as to the cause of the bruises and injuries. In nearly every case it is explained satisfactorily.

Mr. WALLACE. In a good many cases you can not tell from which direction the wound came, by the wound itself?

Dr. FITCH. I have never seen any. We have not had any serious wounds, or any kind of that nature since I have been there. We have numerous bruises and black eyes. Speaking in that connection I would say that we have amongst the insane two classes, or two conditions, which are not frequently met with outside of institutions. That is hematoma of the ear, or the so-called "insane" ear, that sometimes arises without any apparent cause at all. The ear becomes filled with blood. It is gradually absorbed, and the ear is very much distorted in form afterwards. We have had a number of those cases since I have been there.

Mr. WALLACE. How about the other ear at that time?

Dr. FITCH. Which is that?

Mr. WALLACE. Well, a man has two ears. You say one ear becomes that way. Now, how about the other ear at the same time?

Dr. FITCH. I have only known of one case where both ears were affected simultaneously. In the case of Lewis Strange, a colored man, both ears were affected. There was no injury whatever; the ear was not bruised in any way. That effusion is gradually absorbed, and the ear then shrivels and puckers up.

Mr. WALLACE. That condition is generally confined to one ear?

Dr. FITCH. Yes; it is confined generally to the top of the ear. It is the so-called insane ear, that is spoken of in nearly all works on psychiatry. Another condition we have is that we have very numerous cases of subconjunctival hemorrhage. A little blood vessel of the eye becomes ruptured and the conjunctiva fills up and the eye looks like red velvet, without any injury at all. Sometimes they get violent and it is caused in that way, by strain, or something of that kind, or they have encounters with other patients. I have known of one case there where there was absolutely no injury of any kind, and both of the man's eyes were like red velvet. When people come to see those things we simply can not explain them. There is hardly any use in attempting to do so, because they will not believe us. But those are two conditions which exist, and which are well recognized.

Mr. HAY. Speaking of the criminal insane, they are all confined in Howard Hall, are they not?

Dr. FITCH. Every patient in St. Elizabeth, with a criminal charge, is in Howard Hall, except, I think, three women who have some criminal charge against them.

Mr. HAY. Are there any patients not confined in Howard Hall who have been charged with crime, who have not been tried before they have been sent there?

Dr. FITCH. None that I know of. I do not call any to mind at the present time. There were, previous to the time when Dr. White came there, a number of people with charges around in various buildings. He issued an order, I think on the 9th of April, 1904, that all patients having criminal charges against them should be transferred to Howard Hall, and that order was put into effect immediately and they were all taken over there. At that time there were a number in the detached buildings, and some, I think, on the west side. The gentleman asked me if I had any there who are not insane—

Mr. HAY. Just wait one minute until we get through with this branch of inquiry before you go on with that part of it.

Dr. FITCH. Yes, sir.

Mr. HAY. Is Dr. Hagner over there?

Dr. FITCH. Yes, sir.

Mr. HAY. Is he not there under charge of some criminal act?

Dr. FITCH. I don't know.

Mr. HAY. Was he in this criminal ward?

Dr. FITCH. No, sir. I have never thoroughly understood his case. I don't know what was done in that case.

Mr. HAY. Is Lieutenant Howard there?

Dr. FITCH. Lieutenant Howard? I don't know of any patient by that name.

(At this point Mr. Smyser took the chair as acting chairman.)

The ACTING CHAIRMAN. What do you mean by saying that you never understood Dr. Hagner's case?

Dr. FITCH. I don't know. I heard something about that in the Washington Post, I think at some time—no, it was in this paper "Graft," I believe—something about that case of Dr. Hagner; but just what there is to that case I really don't know. I don't know whether he was ever convicted or not.

Mr. HAY. He never was convicted, as I understand.

The ACTING CHAIRMAN. You say he never was?

Mr. HAY. No; but he was under indictment.

The ACTING CHAIRMAN. How did he get over there? I would like to know about this. I want the record to show that it has come to me that Dr. Hagner was indicted for some offense, and somehow or other was landed in St. Elizabeth hospital. If he is not crazy, if he is not a lunatic, we would like to know how he happened to be landed over there. If it was through the courts of justice here in the District we want to know it. If it was through the connivance of people we want to know it.

Dr. FITCH. In that connection I would state this: That the authorities of St. Elizabeth are placed in that situation where they simply have to receive anyone who comes to the institution, committed there, either under a regular commitment or under temporary commitment. We have to receive them.

The ACTING CHAIRMAN. Do you have to keep them?

Dr. FITCH. If they are insane.

Mr. HAY. Is not Dr. Hagner employed there?

Dr. FITCH. He has a position there.

Mr. HAY. Is he not paid?

Dr. FITCH. I think he gets a nominal salary.

Mr. HAY. A nominal salary. Do you know how much he is paid?

Dr. FITCH. I do not.

Mr. HAY. Where is he employed?

Dr. FITCH. He is employed at the Rest.

Mr. HAY. What are his duties; do you know?

Dr. FITCH. He is simply an assistant in a minor capacity to Doctor Blackburn, taking notes and helping him to rearrange specimens.

Mr. HAY. Dr. Blackburn is the pathologist of the institution?

Dr. FITCH. Yes.

Mr. HAY. So that this patient, if he is a patient, is employed and receives a salary and does work in the line of his profession?

Dr. FITCH. Yes, sir; he does clerical work pertaining to medicine or medical subjects.

Mr. HAY. You say you have to receive people there. Are you

obliged to keep them there as long as they want to stay, or as long as their friends want them to stay?

Dr. FITCH. If they are insane, they are kept there.

Mr. HAY. I know; but suppose they regain their health.

Dr. FITCH. As far as I know every case of that kind goes.

The ACTING CHAIRMAN. You mean goes out of the institution?

Dr. FITCH. Yes, sir.

The ACTING CHAIRMAN. Is this Doctor sane now?

Dr. FITCH. I would't care to express an opinion on that subject.

The ACTING CHAIRMAN. Why?

Dr. FITCH. For a number of reasons, sir.

Mr. HAY. You do not think he is sane, do you?

Dr. FITCH. I do not.

Mr. HAY. If he is not sane these complaints that are being made about his being kept there are unjust.

Dr. FITCH. The complaints in that and a number of other cases, I think, are altogether unfounded. I would not care to have my opinion in that particular case published, but I think that is a very good home for the doctor at the present time.

Mr. HAY. And you do not think he is a proper person to be discharged?

Dr. FITCH. No, sir; on account of his habits. Dr. Hagner came there as a victim of the use of drugs of various kinds and also alcoholics. When he came there there was no doubt of his mental disturbance, and he has shown since he has been there evidence of taking up the old life if he ever did get out. We have a number of men over there of that class who have been given opportunities. When they get out of the institution, they go right back to the habit.

Mr. HAY. And it is proper and right that they should be kept there, you think?

Dr. FITCH. Yes, sir; there is no other institution in Washington, no municipal institution, where people of that kind can be committed.

Mr. HAY. So far as you know, in other institutions, are similar classes of cases kept in those institutions?

Dr. FITCH. I think in every institution, sir. That is, I think, one of the hardest and most unsatisfactory class of cases with which we have to deal.

Mr. HAY. Because of the fact that as soon as you think they are in condition to take care of themselves they go out and go back again to the habit and are as bad as they were before?

Dr. FITCH. Yes, sir; that has occurred time and time again in the comparatively short time I have been there.

Mr. HAY. And the only way to restrain them is to keep them there?

Dr. FITCH. That is the only way. In a man constantly using drugs of that kind there is some mental deterioration. He loses control of himself, and that is one of the most important symptoms in nearly every form of insanity—the lack of control.

Mr. BARCHFELD. In other words, he is an irresponsible.

Dr. FITCH. Very much so.

Mr. BARCHFELD. If he were to be given liberty to go out on the public highway his first thought would be to go back to his former life. If he had been in the habit of taking liquor or alcohol to excess, within twenty-four hours he would be beastly drunk?

Dr. FITCH. Yes, sir.

Mr. BARCHFELD. If he had been subject to and had been using morphine, opium, chloral, or any hypnotic—cocaine—he would resort to its use?

Dr. FITCH. Yes, sir.

Mr. BARCHFELD. He would then become irresponsible, and would then be a charge on the public, either falling into the hands of the police authorities, or he might in his irresponsible condition commit some overt act. He might do harm to himself; he might do harm to his fellow-man. The very best thing in the interest of society is to keep that man in restraint—to keep him in an institution of that kind; is that not true?

Dr. FITCH. Yes, for the public welfare, I think.

Mr. WALLACE. Those answers you just made, do they cover the statement that you wish to make to me in answer to the question I asked?

Dr. FITCH. I wish to say this—possibly it is not altogether relevant, but I would like to say it—in connection with my statement that possibly we have some cases of feigned insanity in that department. It is a fact that the soldiers and sailors of the United States are all quite familiar with St. Elizabeth, and that institution is known throughout the Army and Navy as the “Red House.” In nearly every case where a soldier or sailor deserts and is apprehended, if it is simply a desertion and there are no other charges with it, and his record has been good, as a rule he gets about a year’s sentence. They cut off all allowances and pay, and at the end of that time he is discharged from the service, forfeiting all allowances and pay. We have had a great many men come there in years past, and they are coming now, who come there and stay for a time and recover. They are then reported to the authorities, and in a great many cases, I would say in the majority of cases, the balance of their sentence is remitted, they are given the usual gratuities and allowed to go.

A great many soldiers and sailors, knowing that, when they are given their year’s sentence or something of that kind become violently insane, thinking they will come to St. Elizabeth and get out as others whom they know have gotten out. We have a number of such cases; but the last few that have come there, whom we have been pretty well satisfied were not insane, have just been allowed to stay there until their term expired, and were then reported to the authorities as recovered. We sent three away in the last few weeks in that way.

Mr. BARCHFELD. Can you say, as a medical man, that there is no one restrained of his liberty in St. Elizabeth who does not rightfully or properly belong in that institution?

Dr. FITCH. No, sir.

TESTIMONY OF EDGAR L. TURNER.

Edgar L. Turner, being duly sworn, was examined, and testified as follows:

The ACTING CHAIRMAN. What is your name?

Mr. TURNER. Edgar L. Turner.

The ACTING CHAIRMAN. Where do you live?

Mr. TURNER. 1014 Eleventh street northwest.

The ACTING CHAIRMAN. Are you connected in any way with St. Elizabeth’s Hospital?

Mr. TURNER. I am not, sir.

The ACTING CHAIRMAN. What is your business?

Mr. TURNER. Deputy United States marshal.

The ACTING CHAIRMAN. How long have you been deputy marshal, Mr. Turner?

Mr. TURNER. Going on nine years.

The ACTING CHAIRMAN. Did you ever visit St. Elizabeth's?

Mr. TURNER. Quite frequently; yes, sir.

The ACTING CHAIRMAN. As deputy marshal have you any duties to perform in relation to St. Elizabeth's Hospital?

Mr. TURNER. Yes, sir; I visit there on an average of once or twice and sometimes three times a week for the service of writs on the insane.

The ACTING CHAIRMAN. Did you ever go through the institution?

Mr. TURNER. Yes, sir; I have been, I think, in every ward in the institution.

The ACTING CHAIRMAN. Did you ever observe how the patients were treated?

Mr. TURNER. Yes, sir.

The ACTING CHAIRMAN. What did you observe as to the treatment of patients by attendants?

Mr. TURNER. Well, sir, I have many and many a time remarked about the treatment that they receive there.

The ACTING CHAIRMAN. What was the treatment? Was it kind and proper, or otherwise?

Mr. TURNER. I thought so, sir.

The ACTING CHAIRMAN. Did you ever see any instances of abuse?

Mr. TURNER. I never did; and I have been going over there on an average of once or twice a week for the last eight years.

The ACTING CHAIRMAN. And by reason of your official capacity do you go into any ward that your business takes you to?

Mr. TURNER. Yes, sir; I have had free and unlimited access to the wards there.

The ACTING CHAIRMAN. Briefly, what would be generally the object of your visit there?

Mr. TURNER. To serve notices on alleged lunatics who were to be brought before a jury.

The ACTING CHAIRMAN. In the District?

Mr. TURNER. In the District; yes, sir. I have also presided at those hearings, until recently, when Congress changed the law.

The ACTING CHAIRMAN. That was under the old law?

Mr. TURNER. Under the old law there was a marshal's jury.

The ACTING CHAIRMAN. And as marshal, or deputy marshal, you would preside at juries of inquiry?

Mr. TURNER. Juries of inquiry; yes, sir.

The ACTING CHAIRMAN. Do you know of any case since you have been deputy marshal, when people have been committed without having regular process served on them?

Mr. TURNER. I never did, sir. I may state that I serve all of those notices on those patients except when I am off on leave, or away from the city on business for the office; and then my alternate serves them.

The ACTING CHAIRMAN. But except in such cases as that you serve the process, or whatever it is?

Mr. TURNER. I do; yes, sir—a rule to show cause.

The ACTING CHAIRMAN. Sir?

Mr. TURNER. It is a rule to show cause.

The ACTING CHAIRMAN. I suppose it is true that the patient does not always appear in court?

Mr. TURNER. No, sir. They always do when they are able to. That is one of the requirements of the court, that they be produced if they are able to be there; but otherwise a certificate from the superintendent of the asylum stating that they are not able to appear in court is sufficient.

The ACTING CHAIRMAN. And then the hearing is had?

Mr. TURNER. The hearing is had; yes, sir.

The ACTING CHAIRMAN. There has been a good deal said about one Florence Jordan?

Mr. TURNER. Yes, sir.

The ACTING CHAIRMAN. Do you know whether or not she was regularly committed on a hearing?

Mr. TURNER. I do, sir.

The ACTING CHAIRMAN. How was it?

Mr. TURNER. I have taken this from the records of the court. Florence Jordan was tried on the third day of May, 1897, and was found to be of unsound mind by the jury, and she was committed to the institution as an insane patient. The witnesses who testified at that hearing were Dr. Hickling, Dr. Nevitt, Robert M. Morrison, and John Anderson.

The ACTING CHAIRMAN. Was she present in court?

Mr. TURNER. Yes, sir. The inquisition was confirmed May 4, 1897, by Justice Cox. She was discharged as cured by Dr. White on the 10th day of February, 1905. The petition was filed by the Commissioners for a writ of de lunatico inquirendo on the 24th of April, 1897.

The ACTING CHAIRMAN. What truth is there in this? It has come to various members of this committee that this woman was committed out there without any process whatever, and that that is still in vogue. Is there any truth in that?

Mr. TURNER. That is not true. Here are the records of the court, right here.

The ACTING CHAIRMAN. Since Dr. White has been there as superintendent, have there been any commitments without due process of law that you know of?

Mr. TURNER. Not to my knowledge, sir. Of course these cases I am dealing with are the indigent insane of the city here—people picked up as cranks, you know, and such as that.

The ACTING CHAIRMAN. I understand. You know of no such instance?

Mr. TURNER. I do not. I noticed this morning that you had a paper there headed "A Huge Fake" by Mr. Lewis J. Marshall—

The ACTING CHAIRMAN. How did you come to notice that?

Mr. TURNER. I happened to see it there in your hands. I presided at the hearing that committed him there.

The ACTING CHAIRMAN. Oh, he was sent out, was he?

Mr. TURNER. Yes, sir; and I had a terrible time to stop him from talking (laughter).

The ACTING CHAIRMAN. Do you know what he was doing when he was arrested?

Mr. TURNER. Yes, sir; he was wearing the uniform of a penitentiary convict. I know he came into the criminal court the day before with it on, and it created quite an excitement there. We did not know whether to take him into custody or not. He almost broke up the proceedings of the court.

Mr. HAY. What did he say to the criminal court when he came in?

Mr. TURNER. He said nothing at that time, at all. He was arrested the next day on the Avenue by a police officer, and was taken to the station house, examined by the police surgeons and they pronounced him of unsound mind; and he was committed to the asylum a few days after. He was tried and committed.

Mr. HAY. Do you recollect how long he stayed at the hospital?

Mr. TURNER. I do not, sir. He was there some months, though. I used to see him quite frequently when he was over there.

Mr. HAY. He says he was there a year and eleven days.

Mr. TURNER. I guess that is about right.

Mr. HAY. Mr. Turner, you follow the law strictly, I suppose, in sending these people to the asylum?

Mr. TURNER. Yes, sir. The law requires that we serve a rule on these people, and there must be personal service. I see them all, whether they are in bed or up.

Mr. HAY. When they are first taken to St. Elizabeth, before they are brought before the court, you do not know anything about that?

Mr. TURNER. No; but I do know how they are sent over there. They are sent on a temporary commitment from the sanitary officer of the District of Columbia.

Mr. HAY. Do you know how it is done?

Mr. TURNER. I believe the commitment is certified to by two physicians and two laymen, and on that certificate he fills out the certificates and certifies them to the asylum and they are kept there, and within a period of thirty days they are tried by a jury. If the jury finds them of unsound mind they are legally committed to the asylum; if not, they are discharged right in the court room.

Mr. HAY. You say you have been out there frequently. Your duties carry you out there?

Mr. TURNER. Yes, sir.

Mr. HAY. Do you know anything about the food at the hospital?

Mr. TURNER. Yes, sir. I have been there at meal times and have eaten there.

Mr. HAY. Have you eaten in the general dining room, or where do you eat there?

Mr. TURNER. I eat in the room with the supervisors and clerks there.

Mr. HAY. With the supervisors and clerks?

Mr. TURNER. That was before Dr. White came there, however. I have been there at meal time, though, and have seen the patients eating.

Mr. HAY. Did you ever inspect the food?

Mr. TURNER. I have noticed the food; yes, sir.

Mr. HAY. What was the character of it?

Mr. TURNER. I thought it was very good for an institution of that sort.

Mr. HAY. For an institution of that sort?

Mr. TURNER. Yes, sir.

Mr. HAY. How often did you inspect the food?

Mr. TURNER. I don't know. I have been there so often that it would be hard for me to tell. I go through the dining room. If I have a writ for a patient and he is at dinner, to save the attendant bringing him out from the table I go right to the table and serve it on him at the table.

Mr. HAY. And you make a careful inspection of the food?

Mr. TURNER. I could not say that I have made a careful inspection. I have stood there and called attention to it, and have remarked how well fed and how well taken care of they were, many a time.

Mr. HAY. How long ago did you have occasion to see the character of the food?

Mr. TURNER. Week before last, or last week.

Mr. HAY. How long before that?

Mr. TURNER. I go out probably once every week, or maybe twice. I usually leave the office at 10 or half-past 10 to go there. I get there about mealtime, so that I can catch the patients when they are in off the grounds.

Mr. HAY. Is there anything else about the institution that you know anything about?

Mr. TURNER. I don't know; except that I have oftentimes thought how fortunate those poor unfortunates were to have a place of that sort to go to.

Mr. HAY. You think the institution is carefully and generally well conducted?

Mr. TURNER. I think so, sir. I know I have seen nurses and attendants doing things with those patients that I would not do, that is, in the way of attention toward them, you know.

Mr. HAY. I suppose if you were employed there to do those things you would have to do them?

Mr. TURNER. I would not be employed there to do them.

The ACTING CHAIRMAN. You would sooner be marshal, would you not?

Mr. TURNER. That is right.

TESTIMONY OF MISS ROSE HERBERT.

Miss Rose Herbert, being duly sworn, was examined, and testified as follows:

The ACTING CHAIRMAN. What is your name, please?

Miss HERBERT. Miss Rose Herbert.

The ACTING CHAIRMAN. Are you an employee out at the hospital?

Miss HERBERT. I am.

The ACTING CHAIRMAN. How long have you been there?

Miss HERBERT. Nearly fourteen years.

The ACTING CHAIRMAN. What are your duties?

Miss HERBERT. Nurse.

The ACTING CHAIRMAN. How long have you been a nurse?

Miss HERBERT. I have been a nurse most of the time since I have been there.

The ACTING CHAIRMAN. In what ward are you engaged now?

Miss HERBERT. In the epileptic building.

The ACTING CHAIRMAN. How long have you been there?

Miss HERBERT. Four years.

The ACTING CHAIRMAN. How many patients have you there?

Miss HERBERT. There are 39 in my ward at present.

The ACTING CHAIRMAN. How many attendants have you?

Miss HERBERT. I have 3 in the daytime and 1 at night.

The ACTING CHAIRMAN. Have you enough?

Miss HERBERT. No, sir; we have not.

The ACTING CHAIRMAN. Why?

Miss HERBERT. Because epileptics require a great deal of attention. We have one lady to look out for the dining room, and one nurse is left on the ward many a time from noon until 8 o'clock. We have a capacity of forty there, and we have been frequently left with it, and it is impossible for one nurse to look out for the epileptics falling around, and attend to household duties.

The ACTING CHAIRMAN. Your patients are females?

Miss HERBERT. Yes, sir. Our space to-day is more than it was in the old buildings. Now the wards are very much larger, because most of them are buildings, you know, while in the old buildings they were on one floor. Now you have two floors to look after. Our domestic work and general house cleaning is very much more to-day than we have had, and the mental strain and work in looking out for the patients with the help we have is more than we ever had.

The ACTING CHAIRMAN. You think more help would be advisable?

Miss HERBERT. I know it would be, because I can not do justice, and no other nurse could do justice, to forty epileptics, looking after them.

The ACTING CHAIRMAN. Are you the only nurse?

Miss HERBERT. I am the only nurse from half-past 5 until 8 o'clock at night, and my partner the same—from half-past 5 until 8 o'clock at night, and we frequently have none from noon until 8 o'clock. It has happened that way time and time again.

The ACTING CHAIRMAN. What is the treatment of the patients in your ward?

Miss HERBERT. The treatment of the patients in my ward, they all get medicine for epilepsy. The majority of them—three-fourths of them—are epileptics. The others are imbeciles, children and patients that require equally as much attention as an epileptic would. They get medicine——

The ACTING CHAIRMAN. That is their medical treatment.

Miss HERBERT. Yes.

The ACTING CHAIRMAN. How is the food?

Miss HERBERT. The food? Our food is fairly good; good and substantial.

The ACTING CHAIRMAN. What sort of treatment do they receive from yourself and the attendants?

Miss HERBERT. Some of them require as much attention as a baby would, and naturally they require a great deal of attention from the nurses. We give them every attention we possibly can, for one nurse to do, as it very often happens.

The ACTING CHAIRMAN. Did you ever see any cruelty in that ward, any mistreatment of patients?

Miss HERBERT. I have not. There has been nothing but kindness and consideration that I have ever seen.

The ACTING CHAIRMAN. And that is true on the part of what are called the attendants as well as the nurses, is it?

Miss HERBERT. They all combine. They all pay the same attention. There is no difference.

The ACTING CHAIRMAN. Would you tolerate cruelty toward the patients?

Miss HERBERT. I would not tolerate it.

The ACTING CHAIRMAN. Would you report it?

Miss HERBERT. I certainly would.

The ACTING CHAIRMAN. Have you had occasion to report it?

Miss HERBERT. I have never in my life seen a nurse mistreat a patient. I have never seen anything but kindness and consideration of patients.

The ACTING CHAIRMAN. Did I understand you to say you had been there four years?

Miss HERBERT. Four years on this ward.

The ACTING CHAIRMAN. How long all told have you been there?

Miss HERBERT. Nearly fourteen years.

The ACTING CHAIRMAN. And is this true the whole time of your service there?

Miss HERBERT. It certainly is. I have worked in every ward of the institution, among all classes, and I have never seen any cruelty on any of the wards. I have never seen anything but kindness exercised by the nurses.

The ACTING CHAIRMAN. You sometimes have to restrain patients, do you not?

Miss HERBERT. Yes; but you do not have to do it in an inhuman manner. You can do it in kindness. No restraint was used in a cruel way. It was always used to protect the patients and not to abuse them.

The ACTING CHAIRMAN. What sort of restraint do you resort to?

Miss HERBERT. During the last four years, since I have been in the epileptic ward, we never have used anything but the camisole, which I suppose you would call a strait-jacket. It is a long-sleeved woman's waist. Those are put on the patient at the physician's order, but they never remain on longer than to quiet them down—sometimes for an hour, and sometimes for two hours.

The ACTING CHAIRMAN. Have you put them on?

Miss HERBERT. Yes, sir; I have put them on.

The ACTING CHAIRMAN. In doing that was it done for any other purpose than for the good of the patient?

Miss HERBERT. It was never done for any purpose other than to protect the patient, or to protect some other patient, or to keep them from breaking the window lights or something like that and injuring themselves.

The ACTING CHAIRMAN. Did you ever see an instance in which it occurred to you that it was cruelly done?

Miss HERBERT. No, sir; I have never.

The ACTING CHAIRMAN. Do you sometimes resort to the resting sheet?

Miss HERBERT. That has never been used on my ward.

The ACTING CHAIRMAN. You use just the strait-jacket or camisole?

Miss HERBERT. Yes; that is all we use.

The ACTING CHAIRMAN. Without an order from your superior would you do that?

Miss HERBERT. Restrain them?

The ACTING CHAIRMAN. Yes.

Miss HERBERT. I have never restrained a patient without an order from the physician, because no nurse is supposed to do it.

The ACTING CHAIRMAN. And you obey orders?

Miss HERBERT. It try to.

The ACTING CHAIRMAN. Is there any neglect of patients due to a lack of sufficient force?

Miss HERBERT. I know that it is impossible for one nurse to give them the attention they previously had when there was two nurses around to look after them.

The ACTING CHAIRMAN. Did you know a Mrs. Snider?

Miss HERBERT. I did.

The ACTING CHAIRMAN. Do you recall a conversation that you had with her about some handkerchiefs, ribbons, and things of that kind that were sent to her daughter, and that the little girl did not get?

Miss HERBERT. No, sir; we sent all the clothing to her after the daughter was carried home. We sent all that was at the hospital.

The ACTING CHAIRMAN. Did you ever tell her that the things would go to the wash and never come back?

Miss HERBERT. No, I never remember telling her that. All the clothing that she brought, it was necessary to send it to the laundry before we could use them, and they were all very old and dilapidated.

The ACTING CHAIRMAN. Is there such a thing as the nurses and attendants over there keeping clothing or anything that is sent by friends to a patient?

Miss HERBERT. Why, not that I know of. I do not see what they would want with them.

The ACTING CHAIRMAN. Would you tolerate such a thing if you knew it?

Miss HERBERT. I certainly would not.

The ACTING CHAIRMAN. And do you think there is any disposition on the part of the nurses and attendants to do those things?

Miss HERBERT. No, sir; there is not any disposition to use any patient's clothing.

The ACTING CHAIRMAN. When you send articles to the laundry, do they usually come back?

Miss HERBERT. Yes, sir; they usually come back if they are able to come back. A good many are old and torn and probably they may be torn in the machinery.

The ACTING CHAIRMAN. And not come back?

Miss HERBERT. And not come back, not a piece of them.

The ACTING CHAIRMAN. What I want to get at is if you know of anything of that kind?

Miss HERBERT. No, sir; I don't know of anything of that kind.

Mr. HAY. Miss Herbert, where is your home over there?

Miss HERBERT. I room at the nurse's home.

Mr. HAY. At the nurse's home?

Miss HERBERT. Yes, sir.

Mr. HAY. What sort of a place is it?

Miss HERBERT. It is a very nice comfortable home, very pretty and comfortable.

Mr. HAY. Are any restrictions placed upon the nurses there?

Miss HERBERT. There are several restrictions.

Mr. HAY. Are they of such a character as to interfere with the holiday that you may have, or the time that you may have to yourself?

Miss HERBERT. They certainly do interfere with our time off duty very much, and they block the happiness of the home a great deal.

The ACTING CHAIRMAN. In what respect?

Miss HERBERT. To begin with, we go to work at six o'clock in the morning and work one day until half past five and the next day until eight p. m. If you want to go out, you have to get back at quarter after ten. The night latch is put on the only entrance to the home, and if you fail to get in by quarter after ten you must go out to the first entrance of the institution and go to the old administration building and get the key from the night physician, if he is there. If he is not, you have to wait until he comes through the ward to get the key. Sometimes we have to wait an hour. If we had permission to be out until 12 o'clock, it would be necessary for us to wait until one and then walk to the nurses' home, which is distant almost half a mile from the entrance to the old building there. You have to walk over to the home. There are over 100 female employees employed there working in other departments that are allowed the privilege of being home as any lady will at the appointed hour, and who can enter their homes like a lady, with no restriction on them. The nurses are the only ones of the employees that have the night latch.

Mr. HAY. What is the reason for that?

Miss HERBERT. I can not explain. If they have employees there that won't abide by the rules, I think it is unjust that we should all suffer for it.

Mr. HAY. Have any of you keys so that you can get in?

Miss HERBERT. None of the ordinary nurses have; no, sir. Of course the superior officers have always been allowed some privileges that we have not.

Mr. HAY. The superior officers?

Miss HERBERT. Yes, sir.

Mr. HAY. How many of those are there?

Miss HERBERT. About three or four.

Mr. HAY. There are some girls employed there, are there not, in the ward? Do they have any connection with the patients? They call them, I believe, domestics.

Miss HERBERT. We have dining-room girls who never have to take personal care of the patients in any way. Their duties on the ward are simply to look out for the dining room and help to serve the meals, help to keep the dining rooms clean, and do rough work, but they are never supposed to help on the ward. I believe that on May 11 an order was made that when they had time after their work was finished they might help the nurses on the ward, but previous to that time the nurses never received any help from the dining-room girls.

Mr. HAY. How about the food that is given to the patients?

Miss HERBERT. Our food is fairly well—pretty much the same way we have always had it. It is cooked better in the new building than it was in the old.

Mr. HAY. Is it good food?

Miss HERBERT. Yes; it is good substantial food. We have not had enough sugar since January. We have not had the usual amount of sugar.

Mr. HAY. Is there anything else you can say in regard to the food?

Miss HERBERT. There is nothing else I could say in regard to the food.

Mr. HAY. Is there anything else you care to say about the institution?

Miss HERBERT. I would like to make a statement in regard to an order that was issued by the superintendent last October that the trunks, the personal property of all the nurses, should be stored in the basement of the nurses' home, as they scratch the floors. That leaves the nurses then each with a cupboard, a bureau in their rooms, and a washstand. None of these have any lock, and they are supposed to be inspected by one of the ladies in charge, and it leaves the nurses without any place whatever for their private effects. At any time a stranger may be put in the room with you. There are fifty some rooms in the nurses' home and there are 80 occupants, which necessarily means 2 people in a room, and when there is a dismissal and a new one appointed you would be likely to get a stranger in your room. All the personal effects must be inspected by the lady in charge out there.

Mr. HAY. Do these epileptic patients get the same food as the other patients?

Miss HERBERT. Yes, sir; they get good, substantial food.

Mr. HAY. They no not have any special diet?

Miss HERBERT. No, sir.

The ACTING CHAIRMAN. If occasion should require a change in the diet of any patient or patients, would you get that if you asked for it?

Miss HERBERT. If a patient is sick the doctor orders it; but I thought you meant generally.

Mr. HAY. I did mean generally.

The ACTING CHAIRMAN. The general rule is that they all get the same food, but is there any variation from that rule in case of the sickness of any patient?

Miss HERBERT. Yes, sir; the doctor will always order sick diet.

Mr. HAY. How often do you have fruit served to your patients?

Miss HERBERT. We have not had fruit served for several years.

Mr. HAY. Do you mean to say that you have not had any fruit there at all for several years?

Miss HERBERT. Oh, we have strawberries when they are in season; but they used to buy fruit, lemons, and oranges, and stuff like that for the patients. That is what I thought you meant. We get berries when they are in season, and cherries and things of that kind.

Mr. HAY. How about eggs?

Miss HERBERT. We get eggs when they are around. We get eggs.

Mr. HAY. They serve eggs, do they, to the patients?

Miss HERBERT. Oh, yes, sir.

Mr. HAY. How often?

Miss HERBERT. They get them quite often.

Mr. HAY. They say they have 300 gallons of milk a day. Do they serve it to the patients in your ward?

Miss HERBERT. Yes, sir; our patients get milk. They do not get as much as they should, but they get as much as they can spare. We could use more if we had it.

Mr. HAY. How often do you get milk a day?

Miss HERBERT. Twice a day.

Mr. BARCHFELD. Are you a graduated nurse?

Miss HERBERT. Yes, sir.

Mr. BARCHFELD. Is it not a fact that in the management of an institution of this kind the strictest of discipline must be maintained?

Miss HERBERT. I think discipline should be, in an institution of that kind. I certainly do.

Mr. BARCHFELD. Is it not true that the help of the institution is constantly changing, and that occasionally undersirables are employed? That they make trouble while there, and as soon as they are discovered they are discharged, but while there they must be under the strictest discipline. Is not that true?

Miss HERBERT. That is true.

Mr. BARCHFELD. All nurses are not in the same category. Some of them are agreeable and pleasant and of the highest intellectual type. Then some are not in that class. It is the desire of the institution to get the best help and the best nurses they can, and I am satisfied that in their efforts to get the most desirable help and in enforcing this discipline they are only doing the best they can to protect the other real good nurses. You do not feel as though you are being specially picked out from the other nurses, do you?

Miss HERBERT. I think any lady of refinement, a lady that is responsible for the irresponsible, is responsible for her own actions, and I consider it a great indignity to be subjected to things we have been subjected to within the past two years. Any nurse, if she will truthfully acknowledge it, feels the same.

Mr. BARCHFELD. All of the nurses are under the same discipline, are they not?

Miss HERBERT. In the nurses' home; yes, sir.

Mr. BARCHFELD. Do they all complain of this?

Miss HERBERT. At home they do.

Mr. BARCHFELD. Then you think you should be permitted to go into that institution, when the rules say ten o'clock, at half past ten or eleven or any other time that is reasonable in your judgment?

Miss HERBERT. We have always, since I have been in the institution, had to be in at a certain hour, and any lady of refinement and intelligence will certainly be there.

Mr. BARCHFELD. If they allowed the nurses to come in at half past ten or eleven or any other time outside of the stipulated time, do you think that would add to the decorum or order of the institution?

Miss HERBERT. It would not, and it was never allowed. They were always accustomed to be in at a certain hour, and there were never any undue restrictions such as are placed on us at the present day.

Mr. BARCHFELD. Were you ever employed at any other institution?

Miss HERBERT. No, sir.

Mr. BARCHFELD. Do you know anything about nurses' dormitories?

Miss HERBERT. No, sir; I do not.

Mr. BARCHFELD. Do you know whether other institutions have nurses' dormitories as gorgeous as yours?

Miss HERBERT. We have rooms, and our rooms are certainly comfortable.

Mr. BARCHFELD. My comment on the nurses' dormitory there is that I think it is the finest nurses' dormitory in the United States. I have visited many hospitals, and I never saw a finer nurses' dormitory in my life.

The ACTING CHAIRMAN. There has been some complaint made that under Dr. White some nurses were brought down from Binghamton, N. Y., who were advanced more rapidly than the rest of you. Do you know anything about that?

Miss HERBERT. I know of one instance.

The ACTING CHAIRMAN. What was the nurse's name?

Miss HERBERT. Her name was Miss Lane.

The ACTING CHAIRMAN. When did she come?

Miss HERBERT. It will be two years in July since she entered the institution.

The ACTING CHAIRMAN. And was she a graduate nurse when she came?

Miss HERBERT. Yes, sir.

The ACTING CHAIRMAN. What was her pay when she came?

Miss HERBERT. She began at \$20 a month, and she entered the training school there, and she was raised gradually.

The ACTING CHAIRMAN. What is her compensation now? Do you know?

Miss HERBERT. At present she is not working on the wards. She is getting \$35 a month.

The ACTING CHAIRMAN. What are her duties now?

Miss HERBERT. She has a new position, one that was made. It is down at the Rest. I do not know just what her duties are.

The ACTING CHAIRMAN. Well, she was advanced over the other attendants there?

Miss HERBERT. She was advanced over older employees.

The ACTING CHAIRMAN. You mean those who had been there longer?

Miss HERBERT. Yes, sir.

Mr. HAY. Is she getting the highest salary now that is paid to anyone in her class?

Miss HERBERT. I do not know what her salary is since she has been at the Rest. She was getting \$35 on the wards. She has only been in the new position a short while.

Mr. HAY. When she was paid \$35, was that the highest salary that is paid out there to any female nurse?

Miss HERBERT. Yes, sir.

The ACTING CHAIRMAN. Do you know of any other instances of that kind?

Miss HERBERT. I know of an instance that occurred a couple of weeks ago. A nurse was brought on here from Binghamton. One of our nurses that had taken nearly a year of training was taken off of the ward, where she was second girl, and put in the dining room, and the nurse from Binghamton was put in as second girl.

The ACTING CHAIRMAN. Do you know whether there was any reason for that?

Miss HERBERT. I do not know what the reason is.

The ACTING CHAIRMAN. What is her name—that is, the lady who was installed there a short time ago?

Miss HERBERT. Her name is Miss Barrie.

The ACTING CHAIRMAN. Is she in the same ward with you?

Miss HERBERT. No, sir; she is in another building.

The ACTING CHAIRMAN. Do you know what her compensation is?

Miss HERBERT. I never heard directly.

The ACTING CHAIRMAN. Are there any other instances that you know of?

Miss HERBERT. Not of that kind; no, sir.

The ACTING CHAIRMAN. I expect you older people out there did not like that very well, did you?

Miss HERBERT. Well, it is not very encouraging.

The ACTING CHAIRMAN. And you commented on it, no doubt, I suppose among yourselves?

Miss HERBERT. Could you blame us? [Laughter.]

The ACTING CHAIRMAN. I perhaps would have said more than you did, if I had been there, but I simply want to get at the fact, without reflecting upon you or upon anybody else. That is human nature.

Miss HERBERT. Yes.

The ACTING CHAIRMAN. Do you know Dr. O'Malley?

Miss HERBERT. Yes, sir.

The ACTING CHAIRMAN. What do you say as to the advantage of putting her in charge there instead of Dr. Clark? Has it been beneficial or otherwise?

Miss HERBERT. Well, her work goes on just about the same, as far as the patients are concerned. The patients receive the same attention, the very same.

Mr. BARCHFELD. Where is your home?

Miss HERBERT. I was raised in Maryland.

Mr. BARCHFELD. Are your parents living there?

Miss HERBERT. My parents are not living.

Mr. BARCHFELD. They are not living?

Miss HERBERT. No, sir.

Mr. BARCHFELD. You have no brothers or sisters?

Miss HERBERT. No, sir.

Mr. HAY. How often do the Board of Visitors go through your ward?

Miss HERBERT. The Board of Visitors have never been through my ward.

Mr. HAY. They never have been?

Miss HERBERT. Not for the past four years they have not.

Mr. HAY. How often does the superintendent, Dr. White, come through your ward?

Miss HERBERT. He has been through four times in the last fifteen months.

Mr. HAY. Four times in the last fifteen months?

Miss HERBERT. Yes, sir.

The ACTING CHAIRMAN. Does any part of this Board of Visitors come through your ward?

Miss HERBERT. The entire board has never been through. One member, Mrs. Gangewer, has been on the ward three times since we have been in the new building.

Mr. HAY. How long have you been in the new building?

Miss HERBERT. Fifteen months.

The ACTING CHAIRMAN. Is she the only one?

Miss HERBERT. She is the only member; yes, sir.

The ACTING CHAIRMAN. Did you ever call her attention to the complaint you make about the trunks, for instance?

Miss HERBERT. I never did; no, sir.

The ACTING CHAIRMAN. Why did you not?

Miss HERBERT. Why, the superintendent issues an order, and I don't suppose it would be proper to go to her——

The ACTING CHAIRMAN. But the superintendent can not know everything. There are lots of things he can not know unless they are called to his attention. Did you call that matter to his attention?

Miss HERBERT. When the superintendent issues an order, we have no right only to obey.

The ACTING CHAIRMAN. But you would have the right, if the order worked injuriously, to call his attention to it. Did you ever call his attention to it?

Miss HERBERT. No, sir; but I know——

The ACTING CHAIRMAN. Is this the first that Dr. White has known of that complaint among you females out there?

Miss HERBERT. It has been complained of enough to his officials, Dr. O'Malley and the matron, and all knew how opposed we was to it, and we had no right to go further. He has never listened to any complaint we have ever made yet.

Mr. HAY. Who?

Miss HERBERT. The superintendent

The ACTING CHAIRMAN. Dr. White?

Miss HERBERT. Yes, sir.

The ACTING CHAIRMAN. You personally never called his attention to that and stated your grievance in that regard did you?

Miss HERBERT. Not in that respect; but we waited on the superintendent with a committee of the nurses once.

The ACTING CHAIRMAN. In this regard?

Miss HERBERT. Not in this regard, but in another matter, and he told us he was busy and to state our business quick, that he only had ten minutes, and he walked out of the door while we were talking to him.

The ACTING CHAIRMAN. What was that conference about?

Miss HERBERT. We thought we had been treated unjustly by an appointment he had made, and he informed us the appointment was made and we would have to abide by the consequences.

The ACTING CHAIRMAN. Who was the appointee?

Miss HERBERT. The appointee was a lady from Ireland, Miss Fitzpatrick. She had only been in the institution about five years. She was appointed supervisor over other nurses that served a long time and who had acted in the capacity of assistant supervisor.

The ACTING CHAIRMAN. Is she there yet?

Miss HERBERT. At present she is at Ireland and will not return for two months.

The ACTING CHAIRMAN. She is off on leave; but she is still connected with the institution?

Miss HERBERT. Yes.

The ACTING CHAIRMAN. Is she a capable person?

Miss HERBERT. We did not think so.

The ACTING CHAIRMAN. Was that just a little bit of jealousy? How was it?

Miss HERBERT. Not at all. It was not at all jealousy. We had good grounds for it, good substantial grounds. There was others that was more competent and had done good faithful service. We called

the superintendent's attention to it, and he said length of service did not count.

The ACTING CHAIRMAN. And you felt a little aggrieved over that?

Miss HERBERT. Could you blame us? [Laughter.]

The ACTING CHAIRMAN. Well, I do not know whether I could or could not; but that was the fact? I suspect that this is what happened, is it not? I suggest it, knowing what little I do of human nature. When you saw that appointment made you ladies held a little conference over it, and you felt indignant and provoked, did you not?

Miss HERBERT. We certainly did.

The ACTING CHAIRMAN. And finally you concluded to go to Dr. White?

Miss HERBERT. We did.

The ACTING CHAIRMAN. And you narrated to him your grievance?

Miss HERBERT. We did.

The ACTING CHAIRMAN. And he said the appointment was made, and that length of service did not count?

Miss HERBERT. He did.

The ACTING CHAIRMAN. Well, do you entertain a suspicion that that appointment was made by reason of favoritism?

Miss HERBERT. I have every reason to think it was.

The ACTING CHAIRMAN. What makes you think so?

Miss HERBERT. Because I never saw any duty she performed that entitled her to that promotion.

The ACTING CHAIRMAN. What were her duties prior to her promotion?

Miss HERBERT. As nurse.

The ACTING CHAIRMAN. How had she discharged those duties?

Miss HERBERT. She had discharged the duties she performed all right; but she was never in a position to discharge the duties that other nurses had there, because she never had the hard places that many of the other nurses had. She never had the responsible and hard work to do that others had to do.

The ACTING CHAIRMAN. She may have had ample capacity and fitness for the place to which she was appointed; but you thought she was not entitled to it by reason of lack of experience such as others had had? Is that it?

Miss HERBERT. I knew she was not as competent in every way as others that were employed in the institution.

The ACTING CHAIRMAN. Yourself, for instance?

Miss HERBERT. No, sir; not myself. I was never an applicant for the place myself.

The ACTING CHAIRMAN. Who was an applicant?

Miss HERBERT. There were several other applicants.

The ACTING CHAIRMAN. Who were they?

Miss HERBERT. Quite a number. I don't know all of them, but older employees that had been there for a long time—quite a number of them.

The ACTING CHAIRMAN. Did that result in any detriment to the patients?

Miss HERBERT. No, sir; not at all.

The ACTING CHAIRMAN. It simply outraged the feelings of some of you nurses a little.

Miss HERBERT. Yes, it certainly did.

Mr. BARCHFELD. Who is this nurse who has gone to Ireland?

Miss HERBERT. Miss Fitzpatrick.

Mr. BARCHFELD. Is she going there simply for her health or in charge of a patient?

Miss HERBERT. She went in charge of a patient, I believe. They are holding her place there in the institution, though.

Mr. BARCHFELD. When a graduate nurse has charge of a private patient, it is generally a mark of her professional efficiency, is it not?

Miss HERBERT. I don't know. I don't know how she got this place. I don't know anything about that.

Mr. BARCHFELD. These nurses who have private patients receive an allowance of about \$25 per week, do they not?

Miss HERBERT. They do, I believe, when they go out.

Mr. BARCHFELD. That is a greater fee than \$35 per month. Is that not true?

Miss HERBERT. Yes, sir.

Mr. BARCHFELD. Did this Miss Fitzpatrick ever take a postgraduate course at any of the schools for the training of nurses in this country, do you know?

Miss HERBERT. She did take a postgraduate course in our hospital.

Mr. BARCHFELD. What particular course did she take?

Miss HERBERT. Surgery.

Mr. BARCHFELD. In other words, she tried to become an expert in her profession?

Miss HERBERT. Yes, sir.

Mr. BARCHFELD. I think she certainly ought to be encouraged. It is a very worthy example to be followed. We think other nurses should emulate her example.

Miss HERBERT. Other nurses would not be given the opportunity.

Mr. BARCHFELD. Why not?

Miss HERBERT. I know they would not.

Mr. BARCHFELD. How do you know that?

Miss HERBERT. Because when this position was appointed it was kept secret until it was filled and Miss Fitzpatrick had gone. No one knew the position was appointed, and when she left no one knew it until she was ready to go.

Mr. BARCHFELD. Could not you as a nurse to-day go in a hospital for the training of nurses, if you wanted to?

Miss HERBERT. She got her position through the influence of the authorities.

Mr. BARCHFELD. It is not a position. She went there and took a course as nurse—a postgraduate course.

Miss HERBERT. I know she did.

Mr. BARCHFELD. And she sacrificed her salary while she was gone, did she not?

Miss HERBERT. Yes, sir.

Mr. BARCHFELD. She did?

Miss HERBERT. Yes.

Mr. BARCHFELD. I think she is certainly praiseworthy. That is all.

Mr. HAY. Her duties that she performed before she was made supervisor—would they tend specially to make her a good supervisor?

Miss HERBERT. She worked on the wards.

Mr. HAY. What is the difference between the duties of a supervisor and the duties of a nurse?

Miss HERBERT. There is quite a difference. As supervisor you have general supervision of the house, to look after everything pertaining to the housekeeping and help, arranging the relief, and things of that kind, and prior to her appointment she worked on the male department as a nurse.

The record in the case of Cornelia L. Corbett, referred to in the testimony of Dr. Charles H. Clark, was presented to the committee, and is as follows:

GOVERNMENT HOSPITAL FOR THE INSANE.

SYNOPSIS OF RECORD.

Name, Cornelia L. Corbett; case No. 14728; date of admission, June 11, 1904; age, 34; social state, single; nativity, United States; diagnosis of mental disease on admission, paranoia; supposed cause, hereditary; duration on admission, two and one-half years; admitted from District of Columbia; address of friends, Rev. T. S. Hamlin, 1316 Connecticut avenue NW.

MEDICAL CERTIFICATE.

We certify, that after a personal examination of the within-named person, we find her to be insane. The following is a history of the case as far as we have been able to obtain it: Name, Cornelia L. Corbett; age, 34 years; sex, female; single; nativity, American; education, common school, etc.; occupation, none; religion, Presbyterian; post-office address of friends, Rev. Teunis S. Hamlin, 1316 Connecticut avenue NW.

What relatives, including grandparents and cousins, have suffered from either of the following diseases: Insanity, epilepsy, chorea, hysteria, neurasthenia, tuberculosis?—Father committed suicide twelve years ago. Brother committed suicide. Sister insane in asylum.

Were parents addicted to excessive use of alcohol, opium, chloral, or other narcotics?—No.

Habits of patient as to same.—No such habits.

Previous peculiarity of patient as to temper, conduct, etc.—Refined and affable.

Has patient had epilepsy, apoplexy, syphilis, tuberculosis, heat exhaustion, or other serious physical disease?—No.

Evidence of sexual excess or abnormal sexual habits?—None.

History of previous attacks, if any.—No previous attacks.

When and how did the first symptoms of the disease become manifest?—Two and one-half years ago patient first showed symptoms of mental failure; principally slowly developing delusions of persecution.

Was there, previous to that date, any change in disposition, or evidence of physical or mental depression or disorder?—None.

Describe as fully as possible the present symptoms of insanity.—Chiefly consist in delusions of persecution, referable particularly to illegal deprivation of funds belonging to herself and mother, and wide-spread allegations derogatory to her own moral character.

What are the probable causes of the present attack, either predisposing or exciting?—Hereditary, and association with mother, who is insane.

Do suicidal or homicidal tendencies exist; if so, how manifested?—Yes. History of suicide in family; she probably has similar idea.

In what institutions, if any, and when, has patient received treatment?—None.

What special medical treatment has patient received during this attack?—None.

QUESTIONS FOR FEMALES.

Number of children, 0; age of youngest, —; number of miscarriages, 0; date of last one, —.

Has patient had any uterine or ovarian disease?—No.

What menstrual irregularities, if any?—None.

We hereby certify that the foregoing history is as complete as the opportunities at our command will permit.

Examining physicians or surgeons:

JOHN B. GUNION, M. D.,
927 O street NW.
SAMUEL E. WATKINS, M. D.,
1246 Tenth street NW.

Date JUNE 11, 1904.

EXAMINATION OF URINE.

Case No. —; name, Nellie Corbett; ward, Elm; date, June 14, 1904; analysis required, for record.

Physical and chemical characters: Color, yellow; odor, normal; reaction, acid; specific gravity, 1.030; quantity and character of the sediment, cloudy—pus.

Abnormal constituents in solution: Albumin, absent; sugars, absent; abnormal coloring matters, absent.

Microscopical examination: Crystals and amorphous deposits, a few calcium oxalate; casts, absent; anatomical elements, etc., vulva-vaginal epithelium and mucus.

Conclusion and diagnosis: There is no evidence of disease of the urinary tract.

W. D. C., *Analyst*.

RECORD OF CASE.

Case No. 14728; date of admission, June 11, 1904; name Cornelia L. Corbett; examined by Dr. Clark; date of examination, June 21, 1904.

Physical examination: Complexion, white; iris, blue; hair, color, light brown; quantity, scant, quality, fine; facial expression, bright and intelligent; attitude, erect; gait, normal. Skin, color, clear; circulation, fairly good; perspiration, natural; eruptions, none; scars, wounds, etc., none; mucous membranes, color, pink; moisture, moist; scars, lues, etc., none; muscles, development and tone, muscular system not well developed.

Fat, very little; lymphatic glands, no enlargements of any gland; bones, nothing abnormal; anomalies, malformations, cranial peculiarities, nothing peculiar.

Circulatory system: Heart inspection, apex bear normal position. Palpitation, impulse perceptible. Percussion, area of dullness normal. Auscultation, first sound auscultated; second, clear. Artery walls, healthy.

Respiratory system: Nose, medium size, straight. Larynx, slight redness of mucous membrane of the pharynx. Thorax, measurement, inspiration; expiration. Inspection, chest walls symmetrical, ribs prominent, glands small. Palpation, vocal (word illegible), normal. Percussion, no dullness. Auscultation, respiratory sounds clear.

Alimentary system: Appetite, fairly good; digestion, none. Odor of breath, none. Teeth, very good. Fauces and pharynx, apparently normal. Abdomen, condition of walls, thin; form, flat. Stomach, normal position. Liver, normal position. Spleen, normal position. Bowels, condition constipated. Stools, character, formed. Rectum and anus, normal.

Neurological examination: Motor symptoms, character of movements, degree of coordination, no incoordination of any muscle. Attitude, erect. Gait, normal. Paralysis or paresis, none. Contractures, none. Tremor, none. Reflexes, muscle, prompt. Tendon, patellar, achilles, etc., patella of reflexes prompt; ankle (word illegible), absent. Cutaneous, plantar, corneal, etc., reflexes present. Organic, vesical, pupillary, sexual, etc.: Organic and vesical, normal; pupils respond to light and accommodation. Trophic symptoms, skin, mucous membranes, nails, hair, etc., none.

SENSORY SYMPTOMS.

Vertigo, none. Pain, none; occasionally neuralgic pain in eyes. Anæsthesia or paræsthesia, none. Tenderness, none. Sight, normal. Hearing, acute. Illusions of sight and hearing. Smell, natural. Taste, natural. Feeling, tactile temperature, muscular, organic, normal. Muscles, normal.

WARD NOTES.

Name, Cornelia L. Corbett; ward, Cedar.

June 21, 1904: Attention normal; no clouding of consciousness; oriented as to time, persons, and place. Comprehension and reaction good. Memory apparently acute, with retrospective falsification. Ideation rapid and active. Questions answered intelligently, but given to much detail, and many unimportant incidents are introduced in formulating answers to direct questions. Reasoning and judgment unimpaired except as biased by delusions. Persecutory delusions present and thoroughly systematized; also apperceptive illusions of sight and hearing. Emotional attitude fairly normal, but during the reciting of her history becomes emotional and weeps, stating that she and her mother have been most shamefully treated and misrepresented. Is hostile to environment and claims that she should not be incarcerated in an insane hospital, but that it is an outrage and an injustice. Manners good, not impulsive in any way.

June, 1905: The general health of the patient is very good. She has not had any serious illness since her admission to the hospital. Mentally there has been no change in her condition.

December, 1905: The general health of the patient continues good and has been since last note, with the exception of an occasional cold. Mentally there has been no change in her condition. The patient expresses herself well and intelligently, answers direct questions correctly, but in reciting her history covering the past fifteen years she goes into a great deal of detail and as she expresses it, it would take volumes for her to explain how she and her mother have been mistreated and misunderstood by people. She almost becomes incoherent in some of her statements by introducing too many explanatory sentences, and her goal idea is only reached after many detours. Her reasoning and judgment are good except as biased by her delusions.

She entertains delusions of a persecutory nature and are principally against people in the neighborhood where she lived, and the executors of her father's estate. Her memory is accurate but there is undoubtedly falsification, particularly as to minor events in her life, which are now changed and an entirely different meaning is given to them. Her emotional condition is indifferent. She is retiring in her disposition, seldom associating with the other patients on her ward, and remains in her room most of the time.

January, 1906: General health of patient is very good. Mentally there has been no improvement. Since she was returned to the hospital by the order of the court she has been somewhat more depressed, and sits in her room most of the time. She manifests considerable feeling toward the physician in charge of the department for testifying, as she says, against her and her mother.

A writ of habeas corpus was issued in this case December 15, 1905, returnable December 19, 1905. On this date the patient, together with her mother, Caroline E. Corbett, was taken to court. The cause was heard by Judge Barnard, and at the close of the hearing the court ruled that the patient be returned to the custody of the Superintendent of the Government Hospital for the Insane.

WARD NOTES—continued.

Name, Miss Corbett; ward, Elm; date of entry, June 11, 1904.

June 11, 1904: Patient admitted to ward about 7 p. m.; bathed person, and clothing clean and in good condition; slight bruise on left leg; somewhat nervous; went to bed quietly.

June 12, 1904: Complained of not being able to sleep. Slept some nevertheless. Ate very little breakfast. Up and dressed this a. m. Very quiet during day and reserved, talking freely to doctors and mother.

June 13, 1904: Slept at intervals since midnight. Appetite fairly good.

June 15, 1904: Condition continues about the same. Slept well.

June 16, 1904: General treatment. Eggnog, bed. Anti-constipa. pil. tid. Special diet.

July 1, 1904: Patient seems to be gradually improving, though still discontented, and thinks it unjust to be kept in an insane hospital, and that she and her mother have been misrepresented. Has parole with other patients, and will consent 'sometimes to walk on the grounds. Seems to object to meeting strangers. Talks freely of her past life. Memory is good, conversation intelligent and agreeable. Is neat and tidy in habits. Makes her own bed and mends her clothes. Bowels regular. Had a slight cold with cough about ten days ago. Took cough mixture for three days. Sleeps well at night.

July 15, 1904. Patient seems to be more contented. Goes out on lawn in company with the other patients. Attends religious services. Manner pleasant and ladylike. Makes her own bed and mends her clothes. General health seems good.

December 10, 1904. Condition of patient good; disposition quiet. Spends her time reading or sewing. Appetite poor. Rests well.

January 10, 1905. Condition of patient seems somewhat improved during last month. Appetite fairly good. Bowels constipated at times. Rests well. Elixir tinct. iron zii CC.

February 10, 1905. No change in condition of patient. Elixir. lent. iron zii AC.

March 6, 1905. General condition of patient very much improved. Disposition quiet; habits tidy; greater part of her time spent reading and sewing. Anticonstipation pill at bedtime.

April 10, 1905. General condition of patient remains unchanged. R. Gray's gly. len. tinct. nux vomica (i) zii AC.

May 1, 1905. No change in patient's general condition. Quiet and obedient to rules of hospital; habits tidy; pleasant to all. Takes quite an interest in her surroundings. Very anxious to leave hospital. Appetite poor; bowels inclined to be constipated; rests well. R. Gray's gly. tinc. tinct (?) zii AC. Anticonstipation pill ii at bedtime.

June 1, 1905. Condition of patient remains about the same. R. Gray's gly. tonic tinc. nux vomica zii AC. Anticonstipation pill ii at bedtime.

July 1, 1905. No change in condition of patient. Anticonstipation pill at bedtime.

The committee (at 12:20 o'clock p. m.) took a recess until 2 o'clock p. m.

AFTER RECESS.

The committee reassembled at the expiration of the recess.

TESTIMONY OF DR. PRESLEY C. HUNT.

PRESLEY C. HUNT, being first duly sworn, was examined and testified as follows:

The CHAIRMAN. You are a physician?

Dr. HUNT. Yes, sir.

The CHAIRMAN. When were you admitted to practice?

Dr. HUNT. In 1891.

The CHAIRMAN. What college did you graduate from?

Dr. HUNT. The Georgetown Medical School.

The CHAIRMAN. Since then have you practiced in the city of Washington?

Dr. HUNT. Yes, sir.

The CHAIRMAN. Have you any official connection with the District of Columbia?

Dr. HUNT. Only in so far as I am called as an expert. I am neurologist at Providence Hospital.

The CHAIRMAN. Is Providence Hospital here in the District of Columbia?

Dr. HUNT. Yes; I have charge of the nervous and insane cases at that institution. I am also called by the District government to examine cases that have been sent, on temporary commitment, to the Government Hospital for the Insane. I am also called by the Government of the United States in cases where people are accused of crime, to examine into their mental condition at the United States jail.

The CHAIRMAN. Is your compensation paid in the way of a salary or do you get paid in the several cases?

Dr. HUNT. In the separate cases. There is no appointment. I am appointed from week to week. It is practically a permanent employment; that is, it runs along perhaps three weeks out of a month that I serve the District.

The CHAIRMAN. Who fixes your compensation?

Dr. HUNT. The District Commissioners.

The CHAIRMAN. Is it paid out of the treasury of the District of Columbia?

Dr. HUNT. Yes, sir.

The CHAIRMAN. Have you had occasion, in connection with this work, to frequently visit St. Elizabeth's Hospital?

Dr. HUNT. During the past ten months I have visited the Government Hospital for the Insane on an average of once a week. Some weeks I would not go out there; but very often I would go out twice, and in that way it would average about one visit a week; and I would stay anywhere from two to three hours and even longer.

The CHAIRMAN. When you make those visits, is it usual for you to examine one patient?

Dr. HUNT. No; most of those patients are picked up by the police and sent out by the local physician, and they are cases that require very little mental examination to discover their mental condition. It is often only a very short examination of ten or fifteen minutes that is required to bring out the salient points. The number of patients I generally examine is anywhere from four to six or seven a day.

The CHAIRMAN. You speak of temporary commitment. Are those people whom you go out to examine sent to the asylum in the first instance?

Dr. HUNT. In the first place, the police may pick up a man on the street who is visiting the White House, or for some other reason, and they would send him to a station house or to the House of Detention, and put a charge of insanity against him. Then two of the police surgeons examine the case and give their opinion as to whether he is suffering from insanity. He is then certified to the Government Hospital for the Insane for commitment.

Then he or she is sent there, and before the case comes to trial, which under the law has to be within thirty days, I examine that case, generally either a day or two days before the trial comes on. I am allowed to look over the first examination paper made by the different surgeons, and then I examine the man myself to find out his mental condition, and I testify in court to such condition after the police surgeons have testified. If, in my opinion, the case has sufficiently recovered to be discharged, the jury, as a rule, takes my opinion and discharges the patient. Last week, for instance, there were two cases that were certified, one a case of morphiomania and the other a case of hysteria, that were discharged by order of the court on my testimony. That is practically a history of cases of that sort. I can say, without doubt, that in the ten months I have been going to the hospital there has not been a single case which was really railroaded over there, as the papers have mentioned. We read in the newspapers about cases being railroaded over to St. Elizabeth's.

The CHAIRMAN. From your visits to the hospital have you formed an opinion in regard to the general treatment of the patients over there?

Dr. HUNT. In my opinion the treatment they receive is very good, as the acute cases so soon become improved. Very often in acute cases of insanity after talking the matter over with Dr. Clark, with regard to cases of depressive mania, that they should be discharged, although they were not sufficiently recovered to be really discharged; if the family would take a due precaution. In all of those cases that have been so recommended, so far as I know, it has always turned out well. From that I believe that the treatment they receive over at the Government Hospital for the Insane is as good as it is in any institution in the country.

The CHAIRMAN. Have you had experience with other institutions?

Dr. HUNT. No; but I visited, by order of court, the institution at Elwin, which is a hospital for feeble-minded children, although some of the cases there are 30 years old and older. That might be classed as an insane asylum.

The CHAIRMAN. Where is that institution?

Dr. HUNT. It is about 16 miles from Philadelphia.

The CHAIRMAN. At Chestertown?

Dr. HUNT. In Chester County; yes, sir.

The CHAIRMAN. From your observation, do you think that there are a sufficient number of attendants there?

Dr. HUNT. I heard Dr. Clark's testimony. Of course we all know that the more attendants and the more nurses there are on a case the easier it is for the other nurses; but after his statement, which I listened to, I think the number of attendants is sufficient. You see the

trouble is that the more attendants you get the greater would be your care and the harder it is to handle them. I know that over at Providence Hospital there was rather an amusing condition of affairs. At first we had 6 internes, and the young men complained very bitterly about being overworked. We increased the corps to 11, and there is practically just about the same condition existing.

The CHAIRMAN. I mean particularly as to the good of the patient, rather than providing an easier time for the attendant.

Dr. HUNT. I do not believe that discipline could be enforced as well if the force was increased materially. Therefore, in my opinion, I really believe that, so far as the nurses on the women's side are concerned, there are sufficient of them. In regard to the men's department, I do not know as fully. As a rule the cases—and I do not know why it is—that have been over there lately which I have had to examine have been women mostly and therefore I have come more in contact with the women's department than with the male department. From my observation I think the attendants in the male department are sufficient, at any rate in the daytime.

The CHAIRMAN. Do you see the patient you go there to examine in the reception pavilions?

Dr. HUNT. No; at first when the appointment was practically a new one there was some little hesitancy about admitting me, as they did not know exactly what my position was. Now, I go into the ward and examine the patients, observe their surroundings, and often when my examinations take a longer time, I have seen their meals and seen them at the table, and seen them eating their meals in their beds.

The CHAIRMAN. When you say you have seen them at their meals, do you mean that you saw a large number of them together at their meals?

Dr. HUNT. In walking through the different wards I have seen them, but not closely. I think each ward has a dinner room attached to it, and often, in passing, I have looked in. In fact, I have often had to go through the dining room to go to another ward and examine another case. You see that I have to examine each case in person.

The CHAIRMAN. Do you know anything particularly in regard to the food there?

Dr. HUNT. From my observation, the food supply is fairly good. Because they have to cook for such a large number of cases it is not gotten up as nicely as it is at Providence Hospital, which I think is an ideal hospital so far as the food supply goes; but I know it is very much superior to the institution at Elwin. I took care, when I was at Elwin about three or four weeks ago, to observe their food, and it is very much superior to the Elwin food.

Mr. HAY. At Providence Hospital the people are in bed sick, are they not?

Dr. HUNT. No; there are supposed to be acute cases there, but very often they can not turn a case out as soon as they get out of bed.

Mr. HAY. You do not feed 500 people together there?

Dr. HUNT. No; they are brought in on trays.

Mr. HAY. They are fed at the bedside?

Dr. HUNT. They are fed at the bedside. The food that the poor patients get is similar to the food that a pay patient gets. No matter

whether you go there as a free patient or a pay patient at \$75 a week, the food is exactly the same for the same condition.

Mr. HAY. It is a different proposition there.

Dr. HUNT. It is a different proposition.

Mr. HAY. Do you mean to say that before you were appointed to perform this kind of work, that of inquiring into the sanity of these people, that no such office was ever before provided for?

Dr. HUNT. No, sir; and it was done on the initiative of the judges. I suppose they heard, through the newspapers, something about matters over there, as there was a good deal of notoriety given to them, and they wanted the positive opinion of a man who had seen the case just the day before or a few hours before the trial, as they wrote to the Commissioners.

Mr. BARCHFELD. Do I understand you to say that insanity is your specialty?

Dr. HUNT. Neurology and mental diseases.

Mr. BARCHFELD. You are connected with one of the universities here?

Dr. HUNT. No, sir; I am connected with Providence Hospital. I am neurologist at Providence Hospital.

Mr. BARCHFELD. From your observation as neurologist do you think this institution is operated and managed as any hospital for the insane should be managed?

Dr. HUNT. Yes, sir.

Mr. BARCHFELD. Could you suggest any line of reform or any change in the mode or manner of treatment which would inure to the benefit of the institution?

Dr. HUNT. The only reform which I would suggest would be that instead of having one general kitchen, as I understand they do have, they should have several kitchens connected with each of the buildings, and then the food would be in much better condition. Another suggestion would be that there a number of senile dementia cases—that is, old people who are over there. If the District of Columbia had a hospital of its own, not for acute cases, but for these cases of senile dementia, which require a very small amount of care and supervision, it might be well. Those are the only two points that I really think would be a benefit. I think that the hospital itself is well managed and the very latest treatment is carried out.

Mr. BARCHFELD. From your testimony I am led to believe that there is only one general kitchen in which food is cooked for the entire institution. Is that true?

Dr. HUNT. I do not know. I say if that is so—that is the only suggestion I would make.

Mr. BARCHFELD. You do not know about that?

Dr. HUNT. I don't know about it.

Mr. BARCHFELD. I have only visited the institution twice and I do know that they have seven separate kitchens over there.

Mr. HAY. I thought they had ten.

Mr. BARCHFELD. It has been testified here that they have seven. It is quite a proposition to feed a colony of 3,300 people; is it not?

Dr. HUNT. Yes, sir.

Mr. BARCHFELD. To take care of 3,300 people in one building or one combination of buildings is a big proposition.

Dr. HUNT. Yes, sir.

Mr. BARCHFELD. These people evidently try to get the food to the patients just as quick as they can; do they not?

Dr. HUNT. Yes, sir.

Mr. WALLACE. Do you know the proportion of patients and attendants at St. Elizabeth?

Dr. HUNT. No; I do not, sir.

Mr. WALLACE. Do you know how it compares with the Eastern or the Illinois institution?

Dr. HUNT. No; I was here when Dr. Clark read his figures; but I do not remember them.

Mr. WALLACE. You have not been connected with any insane institution outside of St. Elizabeth?

Dr. HUNT. No, sir; and I am not connected with St. Elizabeth at all.

Mr. WALLACE. Have you been connected with any others?

Dr. HUNT. No; I have not.

Mr. WALLACE. I believe you stated that the management of St. Elizabeth was as good as or equal to any in the country?

Dr. HUNT. I think it is.

Mr. WALLACE. How do you arrive at that conclusion, when you are not connected with any other institution?

Dr. HUNT. From my reading, and conversation with others.

Mr. WALLACE. You have never seen any other asylum in operation like you have seen St. Elizabeth's?

Dr. HUNT. No, sir; no insane asylum.

Mr. WALLACE. And the way you arrive at your opinion of this being equal to if not superior to any other is by what you have read?

Dr. HUNT. I know the general plan of what an insane asylum should be, and how it should be carried on. I was for a time connected with the Soldiers Home and know how the food supply for large bodies of men is furnished there. They have a thousand men, and I know how the food supply there was carried on. I suppose that Providence Hospital would accommodate four or five hundred.

Mr. WALLACE. You have not inspected any of the other great institutions of this kind, have you?

Dr. HUNT. No; not insane asylums. I have been in the general hospitals in Chicago, New York, Philadelphia, and Baltimore.

Mr. WALLACE. Those are general hospitals?

Dr. HUNT. Yes, sir.

TESTIMONY OF CHARLES J. BURCH.

CHARLES J. BURCH, being first duly sworn, was examined and testified as follows:

The CHAIRMAN. You are a supervisor at St. Elizabeth's Asylum?

Mr. BURCH. Yes, sir.

The CHAIRMAN. How long have you been such supervisor?

Mr. BURCH. Since 1894, I think.

The CHAIRMAN. Since 1894?

Mr. BURCH. Yes, sir.

The CHAIRMAN. Were you employed in the asylum before that time?

Mr. BURCH. Yes, sir.

The CHAIRMAN. When did you first go there?

Mr. BURCH. I went there on the 21st day of August, 1880, and stayed there until 1887, the 1st day of May, when I resigned and went to New York and accepted a position as attendant in Bloomingdale Asylum under Dr. Nicols. I worked there three years. I was only there three months before I was appointed assistant supervisor in Bloomingdale. I returned to St. Elizabeth's the 1st of May, 1890.

The CHAIRMAN. You have been at St. Elizabeth's ever since?

Mr. BURCH. I have been connected with this hospital for twenty-three years, and was for three years in another one, making twenty-six years of service, all told.

The CHAIRMAN. How does St. Elizabeth's compare with Bloomingdale, in regard to the care and treatment of patients?

Mr. BURCH. Of course I can only testify about the time I was there. I have been away from there since 1900. I do not know that I can compare Bloomingdale with this place. That is a private institution, and everybody there pays their way. A good many of the patients there had their special attendants, and some had two. I know of one case there where they had four attendants. The food supply there, of course, was equal to that of any hotel—the very best that could be got. But so far as the treatment of patients is concerned, I do not consider it as good as it is at St. Elizabeth's. They do not have the exercise, and they do not have the amusements at Bloomingdale that they have at St. Elizabeth's.

The CHAIRMAN. How many patients were there at Bloomingdale when you were there?

Mr. BURCH. They were mostly women. I think we had 165 male patients and 200 female patients; between four and five hundred in all.

The CHAIRMAN. It was a private asylum?

Mr. BURCH. It is a private institution; yes, sir. I believe they care for twenty or twenty-five patients from the district there, because at that time they did not pay any taxes on the land they occupied. They are at present at White Plains, N. Y. At the time I was there they were at 117th street and the Boulevard. I believe now it is called Broadway or North Broadway.

The CHAIRMAN. What do you think generally in regard to the food at St. Elizabeth's?

Mr. BURCH. I have got no fault to find with the food supply whatsoever.

The CHAIRMAN. Is there plenty of it?

Mr. BURCH. I want to start back to give you a good idea of it to the time when Dr. Godding was there and the time when Dr. Richardson was there, if you will let me.

Mr. HAY. We excluded that on the examination of other witnesses.

The CHAIRMAN. I only want to show it by way of comparison.

Mr. BURCH. Under Dr. Godding's administration there was any amount of food sent to the wards. In those days I was an attendant in the ward, and there was as much food wasted that went into the swill barrel as there was used—practically one-half of it. When Dr. Richardson came in he saw the amount of food that was being wasted there and he cut the food down to a good issue to the wards. Of course at times the wards would run a little short of food; but after a while we got enough food for the ward, and if we did not get enough we would send to the kitchen and get more. I always thought that

was a better idea, to send to the kitchen a second time and get more food, than it was to have it wasted.

The CHAIRMAN. Is the food sufficient there now?

Mr. BURCH. Yes, sir; at times we run short, but we can send to the kitchen and get more at any time.

The CHAIRMAN. Do you always get it?

Mr. BURCH. Yes, sir; I have never known of an occasion when it was not supplied.

The CHAIRMAN. How is the cooking of the food now?

Mr. BURCH. Occasionally there may be some material probably not thoroughly cooked; but as a rule it is pretty fair, as I find it. During my time as assistant supervisor I looked after the wards and the receiving department in the old building before we went into B building for several years; but since they opened the B building and since the death of the head supervisor, when I was promoted, my principal business has been in the office after the morning round. So far as food in B building is concerned, we get fair food there.

The CHAIRMAN. Of what building are you now supervisor?

Mr. BURCH. I am supervisor of the receiving department—the old west side.

The CHAIRMAN. How many patients are there in the building you are supervisor of?

Mr. BURCH. In the building I am in we have charge of 444 patients, as my report this morning shows.

The CHAIRMAN. You are the head of the attendants who care for 440 patients?

Mr. BURCH. Yes, sir; and I have two assistant supervisors.

The CHAIRMAN. How many attendants altogether?

Mr. BURCH. We have 54 for our quota. In that quota I have two regular men absent at the present time who have been sent for, but have not shown up. I have found in the last two or three months it has been a hard thing to keep up the regular force, because it seems like we send out for applicants, but they don't show up.

The CHAIRMAN. How many wards are there?

Mr. BURCH. There are sixteen wards in our department, in the old building, and four in the B building, making twenty wards. Eighteen of those wards are being used entirely for patients. One ward is used for sleeping the attendants and nurses in B building and the other ward is used for clerks, electricians, and supervisors. There are no patients in those two wards.

The CHAIRMAN. So that you have under your supervision eighteen wards and about 440 patients?

Mr. BURCH. That is the correct number. This morning there were 444 patients.

The CHAIRMAN. You have 54 attendants?

Mr. BURCH. We have 52 on duty and are 2 short. We have 10 night attendants in addition to that.

The CHAIRMAN. You have two assistant supervisors?

Mr. BURCH. Yes, sir.

The CHAIRMAN. Those supervisors report to you?

Mr. BURCH. Yes, sir. I make my round the first thing in the morning. I start in at a quarter past 6 and visit all those 16 wards and then go over to B building, to headquarters, and make my round there. By that time each and every ward has a report turned

in to me. I take that report and make it up onto an official sheet. My report is made every morning to Doctor Stack, and Doctor White, the superintendent, of all changes that have occurred every day in the movement of patients—the receiving and discharge of patients.

The CHAIRMAN. When you make these rounds do you see all the attendants who are employed there?

Mr. BURCH. I make it a point to see every head attendant in charge of a ward.

The CHAIRMAN. What do you mean by “every head attendant?”

Mr. BURCH. The man who has charge of the ward.

The CHAIRMAN. You did not see the whole 54, because that includes the night attendants as well as day attendants?

Mr. BURCH. No; the 54 does not include the night attendants at all. That is a separate watch.

The CHAIRMAN. Did you see all 54 of those attendants?

Mr. BURCH. I saw the majority of those men; yes, sir. Of course some of them are around cleaning up and sweeping in closets and places where I wouldn't see them, but I would see the majority of them. I saw the head attendant every morning and got a statement as to how things were going, and I see the patients. There may be a few, probably, that I don't see.

The CHAIRMAN. Do any of the patients ever come and have a talk with you?

Mr. BURCH. Yes, sir; often.

The CHAIRMAN. Do they make complaints to you?

Mr. BURCH. I have had complaints—little petty complaints.

The CHAIRMAN. What do you mean by little petty complaints?

Mr. BURCH. Some fellow might complain that some fellow struck him, or things of that kind, but I have never found any case yet of such a thing, and I have investigated them.

The CHAIRMAN. Have you ever investigated charges of cruelty made by anybody?

Mr. BURCH. Yes, sir; I have investigated, and I have seen attendants discharged for it.

The CHAIRMAN. How do you make those investigations?

Mr. BURCH. If a patient complains to you in regard to being abused by an attendant and things of that kind, you have got to go to the attendant and ask his version of the question and then he gives it to you. Then we take the patient and we investigate and find some other patient or some other attendant in the ward. Of course if we find a case that don't warrant a man's dismissal we may take him to another ward. Sometimes we will examine the patient to see if the man has a bruise on him or anything of that kind.

The CHAIRMAN. Is a record kept of all these complaints?

Mr. BURCH. It is reported immediately to the first physician in charge of our department, Doctor Stack.

The CHAIRMAN. Do you know a man named Shuster?

Mr. BURCH. Yes, sir.

The CHAIRMAN. Did he ever make any complaint to you? If so, tell me what you know about that.

Mr. BURCH. Yes, sir; Mr. Shuster made a complaint to me in regard to an attendant in B building.

The CHAIRMAN. Who was the attendant?

Mr. BURCH. Mr. Thorn.

The CHAIRMAN. What happened in that case?

Mr. BURCH. There was nothing happened more than what Mr. Shuster told me and what I found out from the attendants. He told me one morning the attendant shoved him along in going to the dining-room to his meals. Mr. Shuster was a man that didn't require any shoving to go to his meals. He complained one time about losing a knife there and about losing a collar button. There was no record of the knife ever being received or of the collar button. I have heard Mr. Shuster complain of Mr. Thorn.

The CHAIRMAN. Is Thorn there now?

Mr. BURCH. Yes, sir; but I never found any ground whatever to believe there was any abuse used toward him at all. Mr. Shuster was a man that we had confined in bed there for quite a long time; but he finally recovered and got up on his feet in great shape. He wanted to stay in bed all day, and of course it was not best for him to stay in bed and the attendant would have trouble in getting him up. I suppose he would go to take him up and he would resist him. Mr. Shuster was a very irritable man.

The CHAIRMAN. You knew Mr. Ball there; did you not?

Mr. BURCH. Yes, sir.

The CHAIRMAN. Did you ever give him directions, or any of the attendants under you, to take patients out of the wards on the days when the Board of Visitors were coming there, and take them over the hill?

Mr. BURCH. Never did I give an attendant an order to take a patient over the hill from the time of my starting in there.

The CHAIRMAN. We want to know particularly about those times.

Mr. BURCH. Yes, sir. Only for a short time while I was assistant supervisor. It was always customary in our department, on committee days, to have the attendants not to take their patients out until they had orders from the supervisor. Those orders I would receive from my doctor—Dr. Stack. That has been over two years ago and I have not given an order to that effect since. It was always customary in our department. The reason they didn't do that in any other department was that they had inclosures where they kept their patients. For years our men were kept in during the day of inspection.

The CHAIRMAN. You say they were kept in?

Mr. BURCH. I say that for years they were kept in for inspection; but after that, when Dr. Richardson came in, he inaugurated the idea of taking all our patients out. For a long time there were lots of them that did not go out.

The CHAIRMAN. What I am asking is whether there was any difference made on visitors' days from other days?

Mr. BURCH. I have given orders to take them out; yes, sir. You see it was the custom, in our department, not to take our patients out on committee day until the attendants received orders from the supervisor to do so, and a good many times I didn't give the order and they would come down to find out whether they could take them out.

Mr. SMYSER. Did you get orders to take the patients away so that this Board of Visitors could not see them?

Mr. BURCH. Never.

Mr. SMYSER. Did you yourself ever do that?

Mr. BURCH. No, sir.

Mr. HAY. I understand you to say, then, that it was the custom to take these patients out walking every day?

Mr. BURCH. Our patients go walking every day.

Mr. HAY. And on the days when the board of visitors came there, you kept them in until it was known whether the board was coming through?

Mr. BURCH. Yes, sir.

Mr. HAY. If they were coming through to inspect them, they remained in, and if they were not coming through then you took them out as you usually did?

Mr. BURCH. Yes, sir; and our patients were kept in on committee days. But all other days they went out. Sometimes Surgeon-General Wyman would want to see some case that he had charge of there and often we would have to line them up.

The CHAIRMAN. This attendant by the name of Ball testified that on the days when the board of visitors was coming it was the habit of the attendants to take the patients out of sight of the buildings, if possible; and that instructions to take them out on those days were given to him by you and by a supervisor by the name of Coombs. Is that true?

Mr. BURCH. I have given orders to take patients out on committee days; but, as I said before, not until I had orders from the doctor.

The CHAIRMAN. Do you mean to say that you gave the same kind of orders on visitors' day that you gave on other days, and that the only reason you kept them in was so that in the event the board of visitors wanted to see them they could see them?

Mr. BURCH. That was all. They go out every day except that one day, which is committee day; but that order has not been sent down now for two or three years, because it has gotten to be a customary thing and we don't think it necessary to do it.

Mr. HAY. So that now they go out every day?

Mr. BURCH. Yes, sir—Sunday and all. At that time the hospital was small and as we were all practically under one roof.

The CHAIRMAN. When there was bad weather or anything of that kind was there any particular change made in the clothing of the patients? When the board of visitors was going to arrive was good clothing put on them and when they had gone was their bad clothing put on again?

Mr. BURCH. We were always accustomed there, on inspection days, to change the clothes of the patients. We had a great many untidy people and a great many destructive people, and I thought it was proper to change their clothes for inspection, and on Sundays, too. We used to keep our men lined up there on Sunday for inspection by the superintendent.

The CHAIRMAN. Was the superintendent in the habit of going around through the various wards every Sunday?

Mr. BURCH. Yes, sir; before we opened these new buildings.

The CHAIRMAN. How often does the superintendent go through these wards?

Mr. BURCH. Well, I am in B building, and my business keeps me there until 9 o'clock at night. The superintendent come into B building every Sunday and he visits all the new patients and has

quite a lengthy conversation, in the office in B building, with those new cases. Mr. Mullin and Mr. Goddard are the two supervisors who look after the other end of it, and our office is headquarters.

The CHAIRMAN. Any report that you make you make direct to Doctor Stack?

Mr. BURCH. Yes, sir; but my official report is made every morning to the superintendent, on an official blank that is printed.

The CHAIRMAN. Do you take that to the superintendent yourself?

Mr. BURCH. Yes, sir; I take it and read it off to him, and after that I put it in the file; that is, if there are any changes or anything occurs like admissions or removals of patients.

The CHAIRMAN. In the last two years are there any specific cases of cruelty on the part of attendants toward patients that have come to your knowledge?

Mr. BURCH. I never heard of none. The worst I ever heard is what I have read in the newspapers—no, sir.

The CHAIRMAN. Do you mean to say that there are no charges of cruelty that have been made to you as supervisor?

Mr. BURCH. No, sir; only one or two, and it was not cruelty to the patients. If a patient complains of an attendant, the case was investigated, and if we didn't see that there was ground enough to dismiss the attendant and didn't find any bruises on the patient—I have not seen or heard of any cruelty in the past two years.

The CHAIRMAN. What do you know about the case of J. A. Kinsey?

Mr. BURCH. I remember him very well.

The CHAIRMAN. He was a patient, was he not?

Mr. BURCH. Yes, sir.

The CHAIRMAN. What sort of a patient was he?

Mr. BURCH. He was very restless when he first came in and he was very destructive and quite unruly. We had to keep him confined in a room for quite a while there. He made a recovery first, and then he was admitted the second time.

The CHAIRMAN. How was he confined or restrained?

Mr. BURCH. I don't recall that any restraint was ever put on him. He was confined in a room for a while until he got over that period of excitement.

The CHAIRMAN. You mean that he had a room to himself?

Mr. BURCH. Yes, sir; just for a short time. We had him in the receiving ward; but we had to send him out of there because he was pulling everything to pieces and disarranging his clothes where the female nurses were.

The CHAIRMAN. He was tearing his clothes off of himself?

Mr. BURCH. Yes, sir; he would destroy his clothes. He would not tear everything off, but he would become——

The CHAIRMAN. What did you do to stop him from doing that?

Mr. BURCH. We couldn't do nothing. I suppose we could have if we wanted to, but we would put him in a room and let him tear what he had and keep him there.

The CHAIRMAN. Did you put one of those canvas jackets on him?

Mr. BURCH. I never did.

The CHAIRMAN. Did you ever see him with one on?

Mr. BURCH. I don't remember of ever seeing him with one on.

The CHAIRMAN. Did they ever put these leather cuffs on him at all?

Mr. BURCH. That I can't remember. He may have had them on; but I don't remember of him ever having them on.

The CHAIRMAN. Is he there in the asylum now?

Mr. BURCH. No, sir.

The CHAIRMAN. What do you know about M. A. Daddysman?

Mr. HAY. He was in Sycamore ward.

Mr. BURCH. Yes, sir; I think that Daddysman was transferred downstairs because he became quarrelsome with the other patients, and we had a class in Sycamore ward that wouldn't stand for nothing like that.

The CHAIRMAN. You were on White Ash ward once, were you not?

Mr. BURCH. I was in White Ash ward probably twenty years ago.

The CHAIRMAN. Were you in there when Ball was an attendant there?

Mr. BURCH. As supervisor.

The CHAIRMAN. Was it not your duty to look after White Ash ward?

Mr. BURCH. Yes, sir.

The CHAIRMAN. How long ago was that?

Mr. BURCH. We still look after that ward.

The CHAIRMAN. Do you remember telling one of the attendants there to beat and flog patients?

Mr. BURCH. Never, sir; no, sir. That is a false statement. I would not expect to hold my position if I did a thing like that. I might as well go down and turn my keys over as to make such a remark; and I wouldn't stand by and see any patient ill-treated.

The CHAIRMAN. You have never given such instructions to any attendant whatever?

Mr. BURCH. No, sir; I never did.

Mr. HAY. What do you know about the discharge of an attendant there by the name of Weedon?

Mr. BURCH. He was discharged for leaving his ward without permission. I went there in the morning about half-past six and I met him downstairs. I asked him to give me his excuse for it and he said he had none; that he went out to look for chestnuts.

Mr. HAY. This patient says that this man Weedon caught him around the throat and choked him. Did you ever see anything like that?

Mr. BURCH. No, sir; I never heard of it.

The CHAIRMAN. Mr. Ball testified that a patient by the name of Isaac Atherton was very excitable and was cutting up, and that you told him to give him a good flogging if he didn't behave.

Mr. BURCH. I have to deny that charge. It is not so. I never made such a remark.

The CHAIRMAN. Do you remember the case of Isaac Atherton?

Mr. BURCH. I remember the man well; and it is not in me to do a thing like that. My record in that hospital will show I am not that kind.

Mr. SMYSER. Did you ever tell Ball to flog a patient to make him behave?

Mr. BURCH. No, sir.

Mr. SMYSER. Is there any truth in this accusation?

Mr. BURCH. I don't see that there is a bit. It is a prejudiced tale,

the way I look at it. I don't see why Mr. Ball makes such a charge against me. I always regarded Mr. Ball as a very good attendant. He left the hospital once and came back again, and I think he got a little bit angry with me and Dr. Stack because he didn't come back at the same pay. When he came back he had to take what we would give him. The doctor took him back and gave him twenty-five or thirty dollars a month when he was getting thirty or thirty-five at the time he left. He left with a bad feeling toward the hospital.

The CHAIRMAN. Ball testified that after you had given him these instructions he just used the strap to him and made him behave.

Mr. BURCH. No, sir.

The CHAIRMAN. He stated that he had seen this same man Ather-ton hit by others but not badly hurt and that that sort of thing has been usual around the institution, and it happened whenever the strap was handy and pretty nearly every day in that ward. Do you know anything about that?

Mr. BURCH. No, sir; I don't see how it is possible for such things to go on in there as has been stated before this Board, without some one knowing about it. When I was assistant, looking after these wards, my visits were several times a day, and if such work as that was going on somebody would find it out.

The CHAIRMAN. Did you ever know about such things?

Mr. BURCH. No, sir.

The CHAIRMAN. Did you ever have any conversation with Ball in which you said to Ball to strike patients and flog them, or anything that sounds like that?

Mr. BURCH. No, sir; I couldn't afford to do that.

The CHAIRMAN. Did you?

Mr. BURCH. No, sir.

Mr. SMYER. Has the sort of treatment which the chairman has indicated in his question to you been usual throughout the hospital there?

Mr. BURCH. What treatment is that?

Mr. SMYER. Strapping and slapping them.

Mr. BURCH. No, sir; I don't see how it could be possible that such treatment could go on.

Mr. SMYER. I simply want to know the fact. Now I want to ask you another question. If such treatment was customary and usual there, would you know it?

Mr. BURCH. Well, if it was going on I would be apt to find it out in some way, because my visits to the ward——

Mr. SMYER. You say it was not going on?

Mr. BURCH. It could not go on.

Mr. SMYER. Do you say it was not going on? I do not want a process of reasoning. I want the fact.

Mr. BURCH. Well, there may probably be a case of that kind occur occasionally; and if the attendants in the ward would not report it I don't see how we could find it out.

Mr. SMYER. What I want to know is whether such treatment could go on there with your knowledge?

Mr. BURCH. No, sir; I would not tolerate it for one moment.

Mr. HAY. Do you have charge of Gray Ash ward?

Mr. BURCH. No, sir; I never had charge of Gray Ash.

Mr. HAY. Do you know anything about an attendant there named Hogan?

Mr. BURCH. Yes, sir.

Mr. HAY. Was he under your control?

Mr. BURCH. Yes, sir; for quite a while.

Mr. HAY. What sort of an attendant was he?

Mr. BURCH. I always regarded Mr. Hogan as a first-class nurse. He was a graduate nurse.

Mr. HAY. Did you ever hear of his being unkind to any of his patients?

Mr. BURCH. No, sir; he was a different type of man altogether, in my judgment.

Mr. HAY. What are the four buildings you have there, so as to get it in the record?

Mr. BURCH. I am in charge of the receiving department. It was known as the old west side department, but now it is called the receiving department.

The CHAIRMAN. What do you know about the case of Tennyson, one of the attendants who was discharged?

Mr. BURCH. I know Mr. Tennyson very well. He came under our department. Mr. Tennyson was the man who put in his notice for two days to go away, which was an unusual notice. They are generally supposed to give two weeks notice. He was supposed to be on duty on the ward and I went up to the ward in the afternoon and I asked the other attendant what had become of Tennyson. I said that I didn't see him around. He said: "He is gone out for a half a day." I said: "How did he get it? He has got no half day due him." "Well," he said, "he has gone, and taken the keys with him." So he was discharged.

The CHAIRMAN. How about Pendleton? Do you know anything about him?

Mr. BURCH. Yes, sir.

The CHAIRMAN. Why was he discharged?

Mr. BURCH. He was discharged for refusing to take the patients out, and clean up around the building.

The CHAIRMAN. How about Bowen?

Mr. BURCH. Bowen was discharged from a ward in B building for not giving a proper account of a patient—I disremember whether it was a dislocated hip or a collar bone or something of that kind. I questioned him in the morning and he gave me a very unsatisfactory answer and was very impudent about it. I reported him to Dr. Stack and he was discharged. He could not give me any account of it whatever, any more than that the man fell out of bed. The fracture was found by the night nurse in the ward below. He heard the fall and went up there and found this man on the floor. Bowen made no report to me.

The CHAIRMAN. He made no report to you; you reported him and he was discharged?

Mr. BURCH. Yes, sir; and he was very impertinent about it when I spoke to him. He did not seem to care whether I knew about it or not.

The CHAIRMAN. How about T. W. Belt?

Mr. BURCH. There are two of these men. I think he was dis-

charged for intoxication. He was intoxicated in the ward. Mr. Goddard, the assistant supervisor, asked him for his keys and he refused to give them to him. I went in and asked him for his keys and told him they were Government property and I would have to put him off duty until the case was referred to Dr. Stack. He was discharged.

The CHAIRMAN. Were there any attendants discharged on account of cruelty to patients?

Mr. BURCH. I have had a couple of men discharged in my time as supervisor for cruelty to patients; yes, sir. One was a man by the name of Mayfield. Of course that has been some years back. I had another man discharged out of Sycamore ward for kicking a patient. I was not directly responsible for that discharge. There have been three or four or four or five discharges for intoxication.

The CHAIRMAN. Tell me a little more about Thorn. Were there many charges made against Thorn?

Mr. BURCH. I have never heard any complaints of Mr. Thorn only through Mr. Shuster. I have heard more people speak well of him than I have bad.

Mr. HAY. You say you have heard more people speak well of him than you have badly of him?

Mr. BURCH. I have heard more.

Mr. HAY. Have you heard anybody speak badly of him?

Mr. BURCH. I have heard Mr. Shuster.

Mr. HAY. Is he the only one?

Mr. BURCH. He is the only one I ever heard complain of him.

Mr. HAY. From the way you put it, it sounded like there was a division of opinion about him.

The CHAIRMAN. You investigated the complaint which Shuster made, did you?

Mr. BURCH. Yes, sir.

The CHAIRMAN. And came to the conclusion there was nothing in it?

Mr. BURCH. Yes, sir; because Mr. Shuster was a very irritable man. He did not have much use for anybody. You could not do anything to please him for quite a long time. And one time I was one of the best friends he had, but he got down on me before he left there on account of a knife and a collar button.

Mr. SMYSER. I do not know about the rest of the members of this committee, but I get the impression from the testimony we have had before us that on visitors' day you would purposely get patients out of the building and over the hill, so that the visitors could not see them.

Mr. BURCH. No, sir.

Mr. SMYSER. And that your getting them out had that object and purpose in view.

Mr. BURCH. No, sir.

Mr. SMYSER. Is there any truth in that?

Mr. BURCH. No, sir; there is not. I will deny that charge. It is not so. I never made any such order. That was not my object at all.

Mr. SMYSER. Do you know a man named Teates over there?

Mr. BURCH. Yes, sir; I knew him very well.

Mr. SMYSER. Do you know anything about his abuse of an old man?

Mr. BURCH. No, sir; I don't.

Mr. SMYSER. By lifting his leg up and working his leg?

Mr. BURCH. No, sir; I think that is false. That could not be. It is impossible. He is a different man altogether.

Mr. SMYSER. You mean that Teates is not a man who would do that?

Mr. BURCH. No, sir; he is not.

The CHAIRMAN. Is that what you mean?

Mr. BURCH. Yes, sir.

The CHAIRMAN. Was there ever any complaint made about this man by the name of Teates improperly treating a person by the name of Percy Echols?

Mr. BURCH. No, sir; not to me.

The CHAIRMAN. Do you know anything about the case of Percy Echols?

Mr. BURCH. I know him well. He is a man we had over there, a bedridden case, for probably over a year.

The CHAIRMAN. He died in the asylum, did he not?

Mr. BURCH. Yes, sir.

The CHAIRMAN. Did you ever hear that just a little while before he died he received a blow on the head?

Mr. BURCH. Yes, sir; he had a blow on his head. I don't know whether it was a blow or not. I disremember how that did occur; whether he fell out of bed or not. I couldn't tell you; but he had a little scalp wound.

The CHAIRMAN. Did you ever investigate to see what caused that scalp wound?

Mr. BURCH. No, sir; I can't say I did. The doctor visited there every morning and they know about that themselves.

Mr. SMYSER. Do you know anything about Teates knocking him out of bed and knocking him unconscious?

Mr. BURCH. No, sir.

Mr. SMYSER. Do you know anything about him striking him so hard that he fell on the floor on another occasion?

Mr. BURCH. No, sir; I don't know anything about that.

Mr. SMYSER. If this thing had occurred, as I have indicated in this question, would you have known it?

Mr. BURCH. They would have been apt to report it to me; yes, sir. I am the man to report those things to.

Mr. SMYSER. Did any such information come to you, so that you instituted an investigation in respect of it?

Mr. BURCH. No, sir.

The CHAIRMAN. Who was the doctor who had immediate charge of the case of Percy J. Echols?

Mr. BURCH. Doctor Stack. Doctor Glasscock is his assistant.

The CHAIRMAN. Doctor Stack and Doctor Glasscock?

Mr. BURCH. Yes, sir.

The CHAIRMAN. He would come under the care of one of them?

Mr. BURCH. Yes, sir.

Mr. SMYSER. How old are you?

Mr. BURCH. I am 43.

Mr. SMYSER. You started in the business pretty young; did you not?

Mr. BURCH. At 17.

Mr. WALLACE. You stated, I believe, that your ward had fifty-odd

attendants for something over 400 patients and that it was in an ideal condition?

Mr. BURCH. Yes, sir.

Mr. WALLACE. In a splendid condition?

Mr. BURCH. Yes, sir.

Mr. WALLACE. How was it two weeks ago?

Mr. BURCH. It was just about the same.

Mr. WALLACE. How was it a month ago?

Mr. BURCH. We vary in our conditions at the receiving department, if that is what you mean. I don't exactly understand you.

Mr. WALLACE. I will put it in this way. Was it as good two weeks ago as it is now?

Mr. BURCH. Yes, sir.

Mr. WALLACE. Was it as good a month ago as it is now?

Mr. BURCH. Yes, sir; I don't see any change, only in receiving new patients.

Mr. WALLACE. How about a year ago?

Mr. BURCH. Well, we had more patients then than we have now. No, we didn't; we didn't have as many, because we transferred them into the building at one time and we carried 580 some patients a couple of years ago.

Mr. WALLACE. It was not in so good a condition as you described it to be in?

Mr. BURCH. They are more thinned out and the patients have more room.

Mr. WALLACE. Was there any difference three years ago?

Mr. BURCH. No, sir; I can't say I see any difference whatever. Things go along like a household or family over there. Of course, little things may arise now and then.

Mr. WALLACE. You have not painted this up simply for this occasion?

Mr. BURCH. No, sir.

The CHAIRMAN. Do you know anything in regard to the sister of this Mr. Echols visiting him in October, 1905?

Mr. BURCH. I know that his sister has been to see him, but I never had any conversation with her.

The CHAIRMAN. You never had any conversation with her?

Mr. BURCH. No, sir; but I know that his sister has been to visit him.

Mr. SMYSER. You expected to be called here as a witness, did you not?

Mr. BURCH. Yes.

Mr. SMYSER. Have you talked with anybody about your testimony?

Mr. BURCH. I have not.

Mr. SMYSER. With nobody?

Mr. BURCH. Not to my knowledge. I haven't talked to anybody about my testimony.

Mr. SMYSER. Of course you would know if you had talked to anybody about it?

Mr. BURCH. No, sir. Of course I take the newspapers and read them, and we talk to one another; but I have not discussed my testimony.

Mr. SMYSER. What I mean is whether anybody has seen you especially to talk over what you would say as a witness.

Mr. BURCH. No, sir; they have not.

The CHAIRMAN. There is one other thing I want to ask you about. Do you know anything about bathing the patients in your department?

Mr. BURCH. The bathing of patients is left entirely, and has been for the past two or three years, to the charge attendant in the ward. I don't want to go back beyond Dr. White's time——

The CHAIRMAN. I do not want you to. Is the shower system in vogue where you are now?

Mr. BURCH. We have the shower and tub in B building and also the douche room.

The CHAIRMAN. Did you ever hear or know of a case when two patients were bathed in the same water?

Mr. BURCH. I have heard of it, but I don't know it to be so.

The CHAIRMAN. Did you ever investigate any charge of that kind?

Mr. BURCH. No; I can't say that I have.

The CHAIRMAN. Did you ever hear any complaints of that being done in any ward you had charge of?

Mr. BURCH. No, sir; not directly or indirectly. I never heard of it.

The CHAIRMAN. You would not have approved of it if you had known of it?

Mr. BURCH. I would not. I would not care to do it myself and wouldn't let others do it, and I don't think any level-headed man in the ward would let them do so. If they did it was kept a secret from me.

Mr. SMYSER. It would be a good deal easier to do it that way, wouldn't it?

Mr. BURCH. I should think so.

The CHAIRMAN. Do you say you would not have allowed it?

Mr. BURCH. No, sir; I would not. I don't believe to-day that we have got a man in charge of a ward that would allow such a case of abuse to go on, as has been reported here.

Mr. BARCHFELD. Do you take the patients out for exercise when there is snow on the ground?

Mr. BURCH. Not until the walks are clean. The patients, as a rule, go out every day in the year when it is fair and fit for them to go.

Mr. BARCHFELD. That is the best thing for the patients?

Mr. BURCH. Yes, sir.

Mr. BARCHFELD. They get exercise?

Mr. BURCH. Yes, sir. There were a good many of our patients that didn't go out at all, and it was quite hard, particularly for a while after Dr. Richardson came there, to get them out; but after they got to going out they seemed to like to go out.

Mr. BARCHFELD. How often are they exercised?

Mr. BURCH. Morning and evening. They go out about half past 8 o'clock in the day and come back about 11 or a quarter past 11; then they go out probably at half past 1 or 2.

Mr. BARCHFELD. When was your salary last raised?

Mr. BURCH. My salary was last raised last month.

Mr. BARCHFELD. What are you getting now?

Mr. BURCH. Fifty-seven dollars and a half a month.

Mr. BARCHFELD. What had you been getting previously?

Mr. BURCH. Fifty dollars.

Mr. BARCHFELD. Do you like your position?

Mr. BURCH. I don't see that I could do any better. I have been in the business so long that I don't see what else I would do.

Mr. BARCHFELD. You like the work?

Mr. BURCH. Yes, sir.

Mr. BARCHFELD. It is your life profession?

Mr. BURCH. Yes, sir.

Mr. BARCHFELD. You have been at it for twenty-six years?

Mr. BURCH. Yes, sir.

Mr. BARCHFELD. A man who follows a vocation for twenty-six years evidently likes it.

Mr. BURCH. Yes, sir.

Mr. BARCHFELD. You are struggling for promotion and recognition?

Mr. BURCH. Yes, sir; that is my aim.

Mr. BARCHFELD. I am only sorry you are not getting \$90 a month instead of \$57.50.

Mr. SMYSER. You don't think you are getting too much, do you?

Mr. BURCH. I never did think so. I think I could stand a little more.

The CHAIRMAN. Do you think the general condition of the patients would be better if they had more attendants in the ward you have charge of?

Mr. BURCH. That is a question. Our quota of attendants is 54; but in our quota, every day in the week, we have from 6 to 7 off, probably with the exception of one day. Sometimes we will have as high as 12 and then we have got people on vacation during the summer season and probably some one else sick. I should think we ought to have at least 2 or 3 extra men to fill in. Otherwise we get along very well.

The CHAIRMAN. You have not testified what your hours are.

Mr. BURCH. I go to work at 6 o'clock in the morning and work until 9 o'clock every other night.

The CHAIRMAN. What time do you work to on the odd day?

Mr. BURCH. Every other evening until 5 o'clock.

The CHAIRMAN. How often do you get off?

Mr. BURCH. I go off every other evening until 6 o'clock the next morning, 1 day in the month, and every other Sunday.

The CHAIRMAN. Do you get a half a day?

Mr. BURCH. No, sir; I don't get a half a day. The attendants get that.

The CHAIRMAN. You get one day off a month?

Mr. BURCH. I get one day per month and every other Sunday. Of course that is left to me, and if I don't want to go off on Sunday I get the equivalent of it during the week.

The CHAIRMAN. The supervisor does not have the regular half day the attendants do?

Mr. BURCH. No, sir; not in our department.

TESTIMONY OF MISS ETHEL McLANAHAN.

Miss ETHEL McLANAHAN, being first duly sworn, is examined and testified as follows:

The CHAIRMAN. Will you state your full name?

Miss McLANAHAN. Ethel McLanahan.

The CHAIRMAN. Are you employed in St. Elizabeth's?

Miss McLANAHAN. I am.

The CHAIRMAN. In what capacity?

Miss McLANAHAN. As head nurse in the male department in the west side.

The CHAIRMAN. How long have you been employed in St. Elizabeth's?

Miss McLANAHAN. Six years altogether.

The CHAIRMAN. Did you go to the nurses' training school there?

Miss McLANAHAN. No, sir; I graduated from Columbian and Children's hospitals in this city.

The CHAIRMAN. So that you went there as a fully equipped nurse?

Miss McLANAHAN. Yes, sir.

The CHAIRMAN. What was your position when you first went there?

Miss McLANAHAN. As head nurse—the same position I have now.

The CHAIRMAN. Are you in the hospital ward?

Miss McLANAHAN. Yes, sir.

The CHAIRMAN. You are the head nurse in the hospital ward in the male department?

Miss McLANAHAN. Yes, sir.

The CHAIRMAN. In which building are you?

Miss McLANAHAN. I am in the B building, in the hospital ward.

The CHAIRMAN. How many patients are there in that building?

Miss McLANAHAN. We average 100 in that building.

The CHAIRMAN. How many nurses are there who are your assistants?

Miss McLANAHAN. There are 4, with myself. Altogether we have 16 nurses on day duty and 5 on night duty and 2 for the douche treatment—altogether 23.

The CHAIRMAN. You have the douche system in this new building?

Miss McLANAHAN. In our building; yes, sir.

The CHAIRMAN. There are two bath attendants who take charge of that particular work?

Miss McLANAHAN. Yes, sir.

The CHAIRMAN. How often do the physicians visit the wards that were under your care?

Miss McLANAHAN. You mean the assistant physicians?

The CHAIRMAN. Yes.

Miss McLANAHAN. Twice a day regularly, and often between times. The assistant physician, Doctor Glasscock, is in and out of the wards very frequently during the day. Doctor Stack is there twice a day, morning and evening.

The CHAIRMAN. Doctor Stack and Doctor Glasscock are the two physicians who have control over the department you are head nurse in?

Miss McLANAHAN. Yes, sir.

The CHAIRMAN. Do you know of any instances of cruelty that have come under your knowledge?

Miss McLANAHAN. I do not. I have never seen any cruelty practiced at all. There was one case that came under my observation that was reported to the doctor, and the attendant was discharged. In fact, he was arrested.

The CHAIRMAN. What was that case?

Miss McLANAHAN. The attendant's name was Hall and the man's name was Goodall—an old man, about 70 years old, I suppose. He

was sent to the hospital ward with blackened eyes and scratches on his face, and he reported this attendant as being the cause of it.

The CHAIRMAN. Who investigated it?

Miss McLANAHAN. Doctor Stack. I sent for Doctor Stack immediately, and he came there. It was investigated and reported to Doctor White. He came in to see the patient, and the attendant was arrested immediately, as well as discharged.

The CHAIRMAN. He was discharged and then arrested?

Miss McLANAHAN. Yes, sir.

Mr. SMYSER. Do you know whether he was convicted?

Miss McLANAHAN. I think the jury freed him, so far as my knowledge goes. He wanted to be reinstated, but the Doctor would not have it.

The CHAIRMAN. When did that happen?

Miss McLANAHAN. I think it has been about a year and a half or two years ago. I don't just remember the exact date.

The CHAIRMAN. Do you know a man by the name of Teates, who was a nurse?

Miss McLANAHAN. Yes, sir; I do.

The CHAIRMAN. What sort of a man was he?

Miss McLANAHAN. I consider him a very good, quiet man, and I have always found him a good nurse. He graduated from that training school.

The CHAIRMAN. Do you know an attendant by the name of P. W. Belt?

Miss McLANAHAN. Yes, sir.

The CHAIRMAN. T. W. Belt accuses Teates of abusing a patient by the name of George Butts.

Miss McLANAHAN. Yes, sir.

The CHAIRMAN. Did you ever see any such occurrence as that?

Miss McLANAHAN. I never knew of it until I read it in the newspapers.

The CHAIRMAN. Did you know Butts?

Miss McLANAHAN. Yes, sir.

The CHAIRMAN. Was he one of the patients under your charge?

Miss McLANAHAN. Yes, sir.

The CHAIRMAN. Were you in charge all the time Butts was there in the hospital?

Miss McLANAHAN. I was there the entire time.

The CHAIRMAN. What was the matter with Butts?

Miss McLANAHAN. He was an old man who was extremely irritable and untidy and was always getting in and out of bed. He really was not able to stand very well, and in August of last year he slipped on the floor and fractured a hip.

The CHAIRMAN. Mr. Belt stated that Mr. Teates for the sake of abusing George Butts lifted up the broken leg and dropped it. Could such a thing have happened while you were there as head nurse?

Miss McLANAHAN. No, sir; as the fracture occurred four months before Mr. Belt was an attendant there I don't see how it could. The fracture was on the 9th of August and Mr. Belt was employed on the 10th or 12th of December. He was never in the hospital previous to that time.

The CHAIRMAN. Had this fractured hip healed during that time?

Miss McLANAHAN. Yes, sir; although he did not walk well before this fracture occurred. I do not think it would have occurred if he could have walked well. He was very unsteady on his feet when he would get up, and he would be likely to fall against another bed if it was within reach of him. I have gone to take his temperature and he would make a noise as though he expected somebody to hurt him. That was his usual way. He was noisy and he was very irritable and cross.

The CHAIRMAN. Do you think anything of this character could have happened without your absolute knowledge of it?

Miss McLANAHAN. No, sir; I do not.

The CHAIRMAN. Do you know anything about a patient by the name of Percy Echols?

Miss McLANAHAN. Yes, sir.

The CHAIRMAN. He died in the hospital, did he not?

Miss McLANAHAN. He did.

The CHAIRMAN. He was under your care and supervision, was he not?

Miss McLANAHAN. Yes, sir.

The CHAIRMAN. Do you know what was the cause of his death?

Miss McLANAHAN. I do not.

The CHAIRMAN. Did you ever hear any complaint made that he had been struck on the head a short time before his death?

Miss McLANAHAN. No, sir; I didn't know that until I read about it. He fell out of bed on several occasions. He was always very noisy and sometimes had to be locked in the room, as he was destructive and would injure other patients if he had the opportunity. He did strike at them on several occasions to my knowledge.

The CHAIRMAN. You mean that Echols would strike at them?

Miss McLANAHAN. Yes, sir; especially the older men who could not get out of his way very well. On those occasions he was put in a room and locked up for the time being until he quieted down somewhat.

The CHAIRMAN. Do you know Miss Mary Echols, the sister of this man?

Miss McLANAHAN. I met Miss Echols once.

The CHAIRMAN. Did she ever say anything to you relative to the treatment given her brother?

Miss McLANAHAN. She never did.

The CHAIRMAN. She never made any complaint to you in regard to ill-treatment of her brother?

Miss McLANAHAN. No, sir.

The CHAIRMAN. You say that this man Echols was a man who would get out of bed and who would attack other patients?

Miss McLANAHAN. Occasionally he would have disturbed attacks, and he would attack almost anyone that came within reach of him. He would strike the nurses and also strike the patients if he could get them in range. At those times he would strike anyone, and we had to put him where he would not injure himself or others.

The CHAIRMAN. How did you restrain him?

Miss McLANAHAN. We did not restrain him. We put him in a room where he would not be able to get at the other patients until he was quiet.

The CHAIRMAN. Was he ever tied in bed?

Miss McLANAHAN. I think on several occasions we put a camisole on him at night, as he was beating on the doors and windows and he would be apt to bruise himself from that cause—just from banging on the walls.

The CHAIRMAN. He was what you would call a seriously disturbed patient?

Miss McLANAHAN. At times he was a very disturbed patient.

The CHAIRMAN. Do you know what was the matter with him?

Miss McLANAHAN. I am not positive whether it was paresis or not. I am not quite sure. I have heard the doctors talk over the case, but I am not positive what they diagnosed it to be.

The CHAIRMAN. What have you got to say in regard to the food at the institution?

Miss McLANAHAN. I have charge of the sick diet, as they call it, and I consider it very good. We have all the milk we want. We have eggs, and the general diet is very good. Of course it is cooked in large quantities, as you have heard before, and probably would not be as good as you would have in your homes, but it is good, nourishing food.

The CHAIRMAN. How about the butter?

Miss McLANAHAN. Well, I have heard complaints about the butter. Some of them don't like it.

The CHAIRMAN. Have you ever made complaint of it yourself?

Miss McLANAHAN. I am afraid I have.

Mr. SMYSER. Is it butter?

Miss McLANAHAN. It is supposed to be.

Mr. SMYSER. Or is it oleomargarine?

Miss McLANAHAN. I suppose it is oleomargarine, but I am not quite sure what it is. I don't care for it myself.

Mr. SMYSER. It is not the kind of butter we used to get at home, is it?

Miss McLANAHAN. No; not exactly.

Mr. SMYSER. Did you ever see Mr. Teates lift the bed in which that old man with the broken leg was lying and let it fall down so as to jar him?

Miss McLANAHAN. No, sir.

Mr. SMYSER. Could such a thing have happened without your having some knowledge of it?

Miss McLANAHAN. No, I think not.

Mr. SMYSER. Is Mr. Teates a man whom you would believe such a thing of?

Miss McLANAHAN. No, sir.

Mr. SMYSER. You remember Percy Echols, do you?

Miss McLANAHAN. Yes, sir.

Mr. SMYSER. Do you remember his sister visiting there?

Miss McLANAHAN. Yes, sir.

Mr. SMYSER. Do you know whether or not, at the time he died, there were any marks on him?

Miss McLANAHAN. No, sir; I think not.

Mr. SMYSER. Did you ever see Mr. Teates strike him and knock him out of bed and knock him unconscious on the floor?

Miss McLANAHAN. No, sir.

Mr. SMYSER. Could such a thing have happened without your having some knowledge of it?

Miss McLANAHAN. I think not.

Mr. SMYSER. Perhaps it is hardly fair to ask you this question, but here is a witness saying that he saw these things himself. Can you account for it?

Miss McLANAHAN. I can not.

Mr. SMYSER. Was Mr. Teates a man who drank?

Miss McLANAHAN. No, sir; he is a very quiet man. I have never heard him even raise his voice and speak to a patient harshly; and I am in and out of the ward he has charge of a half a dozen times a day. He is the head man in one of the hospital wards.

Mr. SMYSER. If you knew anything about him you would not hesitate to tell us, would you?

Miss McLANAHAN. No, indeed, I would not. I have no reason to conceal anything that I know.

The CHAIRMAN. Did you ever see Bruce Allen or D. M. Allen, an attendant?

Miss McLANAHAN. We used to have one Allen there in the hospital ward, but I don't remember his first name.

The CHAIRMAN. Did you ever see him maltreat this man Butts, who had a broken leg?

Miss McLANAHAN. No, sir—I know who you mean now. No, I never have.

The CHAIRMAN. What sort of an attendant was he?

Miss McLANAHAN. He seemed to be a very good attendant.

The CHAIRMAN. Is he still there?

Miss McLANAHAN. Yes; on night duty.

The CHAIRMAN. Did you ever hear any accusation made against him with regard to maltreatment of patients?

Miss McLANAHAN. I have never heard the patients complain once.

The CHAIRMAN. Do you know why T. W. Belt was discharged?

Miss McLANAHAN. He was intoxicated on duty, I think. He was on duty, and the supervisor went in and found him drunk. He had the doctor come in and see him, and he was discharged?

Mr. SMYSER. Was he tampering with John Barleycorn?

Miss McLANAHAN. I don't know what you would call it, I am sure.

Mr. HAY. How often are you in these wards where this man Teates was?

Miss McLANAHAN. I am in that ward three or four times a day; and if I have a very sick patient I am in there a dozen times a day. I visit first one ward and then another.

Mr. HAY. If the attendants in that ward should conceal everything that was going on there you would not know anything about it, would you? Is there any way you could have found it out?

Miss McLANAHAN. I do not think anything of that kind could go on without my knowing it. We have a female nurse in that department, and she is very careful in observing the treatment of patients, and she would notify me immediately if anything of that kind should occur. She is in the ward all the time, every day.

Mr. HAY. Do you know of anybody being scalded except George Brown's brother?

Miss McLANAHAN. No; I don't know of anyone. I think Dr. Kellogg had a slight burn, something on the order of a blister from a mustard plaster, or something of that kind. He was down in the

douche room, and I think the water was just a little too hot. I think that lasted for about four or five days, and then it was healed over sufficiently so that it did not need any dressing.

Mr. HAY. Have you heard any complaints against George Thorn?

Miss McLANAHAN. I don't know anything personally of Mr. Thorn. Mr. Shuster was the only one I ever heard of being ill-treated by him.

Mr. HAY. You heard no complaints from anybody else?

Miss McLANAHAN. No, sir; no other patients.

Mr. HAY. Have you heard anything about him in any other way?

Miss McLANAHAN. No, sir; only that one case.

Mr. HAY. The people under your charge are generally people who are sick in bed, are they not?

Miss McLANAHAN. Yes, sir; the majority of them in the receiving wards are. Of course some patients go to bed and some don't. It depends on their condition.

Mr. HAY. What have you got to say about the home you have out there for nurses?

Miss McLANAHAN. I think we have an exceptionally nice home.

Mr. HAY. Have you any complaint to make about the restrictions?

Miss McLANAHAN. No, sir; I don't think there are any restrictions that there ought not to be. For instance, about the hall door being locked at night. I would be afraid to stay in that building, situated as it is, without having a lock on the door.

Mr. HAY. Do you think that you ought to have a key so that you could come in at any time you cared to?

Miss McLANAHAN. I do not know whether that would be practicable or not. It might in some instances.

Mr. HAY. Do you think, in the interests of proper discipline, there ought to be anything of that sort?

Miss McLANAHAN. I hardly think so.

Mr. WALLACE. As I understand your testimony, this might be something like the cry of wolf when there was no wolf?

Miss McLANAHAN. Sometimes it would be.

Mr. WALLACE. This old man would just cry out?

Miss McLANAHAN. When no one was near.

Mr. WALLACE. If that occurred, is it not possible that you were so accustomed to that outcry that he could be abused and you would be deceived by that same old outcry?

Miss McLANAHAN. No, sir; I think not, because the nurses are in and out of the wards at all times.

Mr. WALLACE. Of course you have to be in a ward before you know who it is making a noise?

Miss McLANAHAN. Yes; we have a good many noisy patients.

Mr. WALLACE. Is it possible that you might have been deceived in the crying out by the distance you were away?

Miss McLANAHAN. No, I don't think so.

Mr. HAY. Who had charge of Doctor Kellogg when he was scalded?

Miss McLANAHAN. You mean the nurse in the ward?

Mr. HAY. Was he in charge of one of the attendants or in charge of a patient?

Miss McLANAHAN. No; he was with a nurse. There were two nurses. One nurse and one attendant had charge of the douche room. Of course I was not down there.

Mr. HAY. Then you do not know about it?

Miss McLANAHAN. I saw it afterwards; that is I dressed it myself.

Mr. HAY. You did not consider it a severe burn?

Miss McLANAHAN. No; we did not dress it more than three or four days. It was just a slight burn with an abrasion of the skin in one or two places. The rest was just a redness of the surface.

Mr. SMYSER. The skin was already tender from using a mustard plaster?

Miss McLANAHAN. No; I say that the burn was similar to the burn of a mustard plaster.

Mr. SMYSER. I understood you to say there had been an application of mustard.

Miss McLANAHAN. No; I say the degree of the burn was something similar to one caused by mustard leaf applications.

Mr. SMYSER. That was caused by getting into the water when it was a little too hot?

Miss McLANAHAN. Yes; just a little too hot.

TESTIMONY OF MRS. ETHEL CUSIC.

Mrs. ETHEL CUSIC, being first duly sworn, was examined, and testified as follows:

The CHAIRMAN. Are you a nurse in St. Elizabeth's?

Mrs. CUSIC. I am.

The CHAIRMAN. How long have you been there?

Mrs. CUSIC. Almost five years.

The CHAIRMAN. Did you go there as nurse or did you go there after having finally graduated?

Mrs. CUSIC. I took the training there.

The CHAIRMAN. What ward are you connected with?

Mrs. CUSIC. The Toner Building, hall 1.

The CHAIRMAN. Are you under Miss McLanahan, who has just testified?

Mrs. CUSIC. No; I am not.

The CHAIRMAN. Who is head nurse in your department?

Mrs. CUSIC. Miss Tanquary.

The CHAIRMAN. How many patients are there in your ward?

Mrs. CUSIC. There are 26.

The CHAIRMAN. Are you the day nurse?

Mrs. CUSIC. I am.

The CHAIRMAN. What are the hours when you have to be on duty.

Mrs. CUSIC. From 6 a. m. to 8 p. m. one evening and until 5.30 the next evening.

The CHAIRMAN. Do you have a half a day off once a week?

Mrs. CUSIC. I do.

The CHAIRMAN. You have Sundays off how often?

Mrs. CUSIC. I have every third Sunday.

The CHAIRMAN. Every third Sunday and every third holiday?

Mrs. CUSIC. Yes, sir.

The CHAIRMAN. Do you live in the nurses' home?

Mrs. CUSIC. I do not.

The CHAIRMAN. Where do you live?

Mrs. CUSIC. I have a room with my husband in one of the buildings where there is a ward for colored patients.

The CHAIRMAN. You say you have a room with your husband?

Mrs. CUSIC. I do.

The CHAIRMAN. Is he also employed in the asylum?

Mrs. CUSIC. Yes.

The CHAIRMAN. What is his department; is he an attendant or nurse?

Mrs. CUSIC. He is classed as an attendant. He is a barber.

The CHAIRMAN. What have you to say generally in regard to the treatment of patients under your care?

Mrs. CUSIC. I consider it to be very good.

The CHAIRMAN. Are your patients male patients?

Mrs. CUSIC. My patients are female patients. They average an age of about 60. I have bedridden cases.

The CHAIRMAN. Most of them are old women?

Mrs. CUSIC. Old women; yes.

The CHAIRMAN. How many other nurses are there with you?

Mrs. CUSIC. There are usually myself and three others.

The CHAIRMAN. Is that for both day and night duty?

Mrs. CUSIC. No; we have two night nurses.

The CHAIRMAN. So that there are six nurses altogether connected with this ward?

Mrs. CUSIC. Yes.

The CHAIRMAN. Are there any attendants besides those?

Mrs. CUSIC. I am the only nurse; then I have a senior nurse and junior nurse and an attendant and a girl in the training school at present.

The CHAIRMAN. Are you in the ward all the time you are on duty?

Mrs. CUSIC. I am.

The CHAIRMAN. What do you know specifically about the case of Lottie P. Wright?

Mrs. CUSIC. I remember her. She was quite an exhausted case. She was disturbed and restless when she came in.

The CHAIRMAN. How old a woman was she?

Mrs. CUSIC. I think she was about 21 or 22.

The CHAIRMAN. Do you know why she came to the hospital?

Mrs. CUSIC. Yes; it was puerperal mania.

The CHAIRMAN. How long was she there?

Mrs. CUSIC. Just a month.

The CHAIRMAN. Did she recover?

Mrs. CUSIC. Yes; it was considered a recovery, I suppose.

The CHAIRMAN. Was she a disturbed patient?

Mrs. CUSIC. Yes; she was.

The CHAIRMAN. How did she manifest the disturbance?

Mrs. CUSIC. She would beat on the doors and climb up on the window sills and all such things as that, and she was noisy at times.

The CHAIRMAN. Was it necessary to confine her to her bed?

Mrs. CUSIC. Yes; it often was.

The CHAIRMAN. How was that done?

Mrs. CUSIC. With a rest sheet.

The CHAIRMAN. Describe what a rest sheet is.

Mrs. CUSIC. Well, it is a very comfortable arrangement. It fastens all around the bed, and then inside is a jacket that goes on to the patient and they have free use of the hands, but they can not get them out to

their neck or up to their face. Then they have free use of the lower limbs.

The CHAIRMAN. In the case of Mrs. Wright, by virtue of her trouble, her limbs had to be tied together, did they not?

Mrs. CUSIC. That was due to an operation or laceration.

The CHAIRMAN. That was entirely apart from the rest sheet?

Mrs. CUSIC. Yes; that was absolutely necessary for her welfare.

The CHAIRMAN. What have you to say about the food in the institution?

Mrs. CUSIC. The food is very good, taken as a whole. We have plenty of milk, and we always serve eggnog to our sick patients between times.

The CHAIRMAN. Do you know anything about the food that is served to people other than those in the hospital ward?

Mrs. CUSIC. No.

The CHAIRMAN. So that you are speaking of the food provided in the special hospital ward?

Mrs. CUSIC. I am speaking of the food provided for my patients.

The CHAIRMAN. There is plenty of that?

Mrs. CUSIC. Yes, sir.

The CHAIRMAN. And it is served in proper condition?

Mrs. CUSIC. Yes, sir.

The CHAIRMAN. Do you know of any instances of nurses or attendants slapping patients?

Mrs. CUSIC. I do not.

The CHAIRMAN. You never heard of such a thing in your ward?

Mrs. CUSIC. No; I have never heard of such a thing in my ward.

TESTIMONY OF J. A. GLEESON.

J. A. GLEESON, being first duly sworn, was examined, and testified as follows:

The CHAIRMAN. You reside in the city of Washington?

Mr. GLEESON. Yes, sir.

The CHAIRMAN. How long have you lived here?

Mr. GLEESON. Fifty-two years.

The CHAIRMAN. What is your occupation?

Mr. GLEESON. I keep a saloon at 335 I street northeast. I have been living in the same house for forty-four years.

The CHAIRMAN. Have you had occasion to go frequently to St. Elizabeth's Hospital?

Mr. GLEESON. I go there twice a week.

The CHAIRMAN. You have a daughter there?

Mr. GLEESON. I have had a daughter there, sir, since the 2d day of November, 1904.

The CHAIRMAN. Has she always been in the same ward?

Mr. GLEESON. No, sir; she used to be up in Elm ward. Then she was moved down to C building, No. 1 floor, and now she is moved to C building, No. 2 floor, on the south side.

The CHAIRMAN. What have you to say in regard to her care and treatment?

Mr. GLEESON. Well, sir, I think the treatment is fine. The nurses are fine. They can't be improved on, according to my idea about it.

I stayed there sometimes three or four hours and I pay for my daughter regularly \$65 every three months. I know that I could not give her half the attention home that she gets there.

The CHAIRMAN. You do not visit the hospital at any stated time?

Mr. GLEESON. No, sir; sometimes I go in the morning and stay a half a day. My wife goes sometimes, and sometimes I will go in the evening and stay a half a day. I never leave there short of three or four hours when I go there in the daytime.

The CHAIRMAN. You and your wife both think that she has as good treatment as she can possibly have?

Mr. GLEESON. Yes, sir; my wife is there to-day, and we think she gets excellent treatment.

The CHAIRMAN. What is the matter with her?

Mr. GLEESON. Well, she first got melancholia, and she was going on that way, I guess, for eight or nine years, until we found that we couldn't keep her at home and we put her over there. We did talk about taking her to Mount Hope, as we had some prejudice against the institution, as I heard so many bad tales about it; but we find since we have been going over there, as far as we are concerned, we know positively it is false from what we see for ourselves.

The CHAIRMAN. Is the food good, so far as you know?

Mr. GLEESON. I couldn't say, sir; but she tells me she gets plenty of everything. She is not really violent. She knows us, and sometimes she knits and sews and one stuff and another. We had her home for three weeks at Christmas; but we are living so close to the railroad, within about 15 feet of it, that we brought her back again, because she couldn't sleep for the cars passing by at night. Only for that I would have her home now probably a week or two at a time. When this new railroad terminal is finished we intend to try her again for a week or two at a time.

Mr. HAY. How old is she?

Mr. GLEESON. She is 28 years old her next birthday.

The CHAIRMAN. You pay \$20 a month for her?

Mr. GLEESON. I pay \$65 every three months—thirteen weeks regular. I never miss. I get a bill every quarter, and although she has got nothing in her own right, I feel that I have a right to pay for her as long as I am able to.

Mr. SMYSER. You want to do that because you are satisfied with the treatment she receives?

Mr. GLEESON. Yes, sir; more than satisfied, because I know she is properly cared for. I know that she can't do herself any bodily harm when she is there. Those nurses are as fine as I ever saw. They can't be beat, according to my idea about it, and I believe I am a little judge of human nature.

Mr. HAY. You say that she would be able to complain to you and tell you anything that happened, if anything unkind did happen to her?

Mr. GLEESON. Yes, sir; I know positively she would.

Mr. SMYSER. Are you an Irishman?

Mr. GLEESON. Yes, sir; born in Ireland, genuine; but received an American education.

TESTIMONY OF C. P. RHODES.

C. P. RHODES, being first duly sworn, was examined and testified as follows:

The CHAIRMAN. I believe you are a proof reader in the Government Printing Office in this city?

Mr. RHODES. Yes, sir.

The CHAIRMAN. Did you ever visit the Government Hospital for the Insane?

Mr. RHODES. Yes, sir.

The CHAIRMAN. For what purpose were you in the habit of visiting there?

Mr. RHODES. When I first visited there I was connected, as I am yet, with the Christian Endeavor Society of the District of Columbia; and I visited there for the purpose of leaving literature for the patients to read, which was accumulated by the churches. My last visits over there were when I had my father-in-law there. He died there last fall.

The CHAIRMAN. What was your father-in-law's last name?

Mr. RHODES. Conner.

The CHAIRMAN. Did you visit the asylum frequently while your father-in-law was there?

Mr. RHODES. I am not positive as to the number of visits; but I think I visited there every day, either in the daytime or at night. I have gone into the grounds and gone in to see him at 9 or 10 o'clock at night.

The CHAIRMAN. Did you stay there any considerable length of time?

Mr. RHODES. Yes, sir; I have often gone there and found him asleep and stayed there in the ward until he would awaken.

The CHAIRMAN. In what ward was he?

Mr. RHODES. I think he was in D Building. It is a new building, where the officers are.

The CHAIRMAN. How long was your father-in-law ill there before his death?

Mr. RHODES. I think he was only there two or three weeks.

The CHAIRMAN. What was the matter with him?

Mr. RHODES. I read the certificate of death, but I don't remember the wording of it now. From my personal observation of the institution, having years ago visited an institution at Columbus, Ohio, on different occasions, I am only sorry in my own mind that I didn't have him over there a year before I did.

The CHAIRMAN. Had he been in another asylum before this?

Mr. RHODES. No, sir. We had tried to keep him at home, and he injured the oldest daughter. He injured my sister-in-law with his cane. He was in the habit of waking up at all hours of the night and dressing himself and going out. My wife and her sister could not handle him. The two of them together could not handle him, and they would have to awaken me, as a last resort, to get up and put him in bed by force.

The CHAIRMAN. What is your general idea as to the way he was cared for in St. Elizabeth's?

Mr. RHODES. I do not think he could have been cared for in any

hospital in this city or anywhere else in a better manner than he was cared for there.

The CHAIRMAN. Have you visited other hospitals besides this?

Mr. RHODES. Yes, sir.

The CHAIRMAN. What ones?

Mr. RHODES. One at Columbus. I visited out there, and they were in the habit of having dances on Friday nights. My father was clerk in the Ohio legislature at that time and had invitations to go to these dances. My sister and I went out there. One of the rules of the institution was that if any visitor wanted to take part in the dancing they would have to agree beforehand not to refuse to dance with any of the patients if they came and asked them to dance. One night we were having what they call a square dance, when one of the female patients made a rush and grabbed a young man seventeen or eighteen years old, and it took four attendants to get her away.

The CHAIRMAN. Of course that was not in St. Elizabeth's Asylum.

Mr. RHODES. No. I only mention that because I think that the statements that have been made about the cruelty to patients over there are sometimes caused by the actions of the patients toward the attendants.

The CHAIRMAN. Did you ever see any cruelty in St. Elizabeth's of any kind?

Mr. RHODES. No, sir.

The CHAIRMAN. From observation, what is your general opinion as to the character of the attendants they have there?

Mr. RHODES. I think they are all right. I think their character is of the highest. I know from my experience with my father-in-law. The first time my wife went with me to visit him he was in the hospital ward in bed. I don't know whether some of the patients had been talking to him about being restrained and kept in there all his life or not; but he jumped up and made at me as if he wanted to handle me roughly, and the attendant had to handle him by force and put him back in bed and hold him there. Then we left. He acted maliciously toward me.

The CHAIRMAN. Did this attendant put your father-in-law back in bed in an unnecessarily rough manner?

Mr. RHODES. No, sir.

The CHAIRMAN. He did not strike him?

Mr. RHODES. No, sir; he seemed to have lots of patience with him, and seemed to want to handle him more carefully than my wife or her sister would, because they hadn't the patience with him that I had. Of course I never saw the time that I couldn't handle him by force, but I have seen the time when I didn't think it was safe for me to go to sleep without having some one awake in the house.

The CHAIRMAN. Did you have any occasion to examine the food that was provided for your father-in-law?

Mr. RHODES. No, sir; but I know that Miss McLanahan, the nurse, made punches for him and brought them in to him.

The CHAIRMAN. He was in the hospital ward, was he?

Mr. RHODES. Yes, sir. I think she has been there some twenty-five years, and I consider her an excellent nurse.

Mr. SMYER. From what you observed there, would you say that institution was well managed?

Mr. RHODES. I think so.

Mr. SMYSER. And the patients well treated?

Mr. RHODES. I think so. They never had any notice of when I was coming. One evening I left the city at 8 o'clock at night and got over there at almost 9 o'clock, and I never went over there at night but what I could find the doctor, although of course it was not necessary to find Dr. White. I could find Dr. Stack or Dr. Glasscock.

Mr. SMYSER. From what you could observe, was there any neglect of the patients?

Mr. RHODES. I don't think there was. In my own business at the institution and in my visits I always found they were very accommodating. In fact, I was down town the night he died. I had come down town for the purpose of being there until 11 or 12 o'clock. I was to be initiated in an organization that night. They telephoned out and had a messenger find me, and had me go home and bring my wife and sister over there, and we were there two or three hours before he died. They made everything as comfortable for us as they could. The comparison I would make, from general observation of the grounds and the freedom of the patients over there, as compared with Columbus, would be that Columbus is a little more prison-like than this institution.

Mr. SMYSER. You have not been at Columbus lately?

Mr. RHODES. I have been at Columbus lately, but not to that institution.

Mr. WALLACE. What was your father-in-law's name?

Mr. RHODES. Richard R. Conner.

(The committee thereupon, at 4 o'clock p. m., adjourned until to-morrow (Tuesday) morning, May 22, 1906, at 10 o'clock a. m.)

HOUSE OF REPRESENTATIVES,
Washington, D. C., May 22, 1906, 10 o'clock a. m.

The committee met pursuant to adjournment.

Present: Messrs. Olcott (chairman), Smyser, Barchfeld, Hay, and Wallace, also Dr. William A. White, Mr. Evans, Dr. Emmons, Thornton O. Pyles, and others.

TESTIMONY OF DR. MAURICE J. STACK.

MAURICE J. STACK, being first duly sworn, was examined and testified as follows:

The CHAIRMAN. You are connected with St. Elizabeth's Asylum?

Dr. STACK. Yes, sir; I am first assistant physician at the Government Hospital for the Insane.

The CHAIRMAN. How long have you been employed there?

Dr. STACK. For about twenty-nine years.

The CHAIRMAN. When were you admitted to practice medicine?

Dr. STACK. In the year I first became connected as a medical officer with the asylum.

The CHAIRMAN. What was your position when you first went there?

Dr. STACK. Junior assistant physician.

The CHAIRMAN. You have been there continuously ever since and are now first assistant physician?

Dr. STACK. Yes, sir.

The CHAIRMAN. What in your opinion is the character of the care and treatment of the patients there in the hospital, generally speaking?

Dr. STACK. Generally speaking, I think it is as good if not better than in any public institution in the country.

The CHAIRMAN. Have you visited other institutions?

Dr. STACK. I have casually visited other institutions at different times.

The CHAIRMAN. What ones?

Dr. STACK. I have visited the Bloomingdale Hospital at New York, both the new and the old hospital. One of our former assistant physicians is the superintendent there.

The CHAIRMAN. What is his name?

Dr. STACK. Samuel Lyons. I visited the Shepherd and Pratt Hospital at Baltimore.

The CHAIRMAN. Those are both private institutions?

Dr. STACK. Yes; those are both private institutions, but are conducted on the same general principles as St. Elizabeth's. Then I visited the Trenton Hospital and the one at Danvers, Mass., and the one at Taunton, Mass.

The CHAIRMAN. Are the last two you mentioned public hospitals?

Dr. STACK. Yes; they are State hospitals.

The CHAIRMAN. Do you know anything about the number of patients they accommodate?

Dr. STACK. I should say between seven and eight hundred, and perhaps the same at Trenton, at the time I visited the hospitals.

The CHAIRMAN. The science of the treatment of the insane has improved a great deal, has it not?

Dr. STACK. Great advancements and reforms have been made in the method of the care and treatment of the patients and the conduct of hospitals for the insane.

The CHAIRMAN. In what way, particularly?

Dr. STACK. For instance, when I first became connected with hospitals in this class of work it was unknown to have a night nurse on the wards. They would have one general night watchman who would patrol the outside of the building and another who would patrol the inside of the buildings. His duties would be to go through each ward once an hour. Now in all the wards in which we have sick patients and epileptics at St. Elizabeth's we have at least one night nurse on duty. Take our B building, the hospital building, which comes under my supervision, and there are four night nurses, one in each ward, and then a general patrol nurse who has charge of the entire force. Then no medical officer used to be attached for duty at night. I never heard of it until it was first done in St. Elizabeth's. Now it is a regular custom.

The CHAIRMAN. Do you mean to say that having a medical officer on duty at night was first started at St. Elizabeth's?

Dr. STACK. To the best of my knowledge, it was. It is a matter of absolute custom for us now to have a medical officer on duty at night, and if he should happen to be on leave or sick one of the day men would be detailed to take his place. Then, in addition to that, the care and supervision of the patients generally, especially of the sick, has been improved by the introduction of trained nurses and of women nurses in the men's wards to look after the sick.

The CHAIRMAN. Is that practiced now in insane asylums?

Dr. STACK. Yes, sir; and it is a very recent practice indeed.

The CHAIRMAN. How recent do you mean?

Dr. STACK. I think St. Elizabeth's was one of the very first to adopt it.

The CHAIRMAN. When was it established there?

Dr. STACK. From memory, I would say it was about five or six years ago.

The CHAIRMAN. Has there been any change in the care of the insane, relative to separating different classes of insane patients?

Dr. STACK. Yes; in that respect there has been a distinct advance; and it is particularly noticeable under the present administration in the segregation of epileptics.

Mr. SMYSER. Just describe that so we will know what you are talking about.

Dr. STACK. We collect those who are suffering from epilepsy in one ward, in order that they may have their own nurse and their own night nurse, who is familiar with their condition. Then also we separate into distinct wards, for proper care and treatment, persons suffering from tuberculosis, both men and women—not only for their own benefit, but for the benefit of the general health of the hospital.

The CHAIRMAN. What other classes of patients are separated in St. Elizabeth's?

Dr. STACK. Those who are helpless and bedridden are specially provided for, and also those who are acutely sick.

The CHAIRMAN. That you think is advantageous to the general care of the patients?

Dr. STACK. Yes; I am sure it is a distinct advance.

Mr. SMYSER. How about what you would commonly call imbeciles?

Dr. STACK. The weak-minded and those who, on account of their personal habits resulting from weakness of mind, require more custodial care than active medical care, are separated in wards, generally speaking.

The CHAIRMAN. What are your particular duties in St. Elizabeth's?

Dr. STACK. I have charge of one department of the hospital.

The CHAIRMAN. What is that department?

Dr. STACK. It is the receiving service, properly so-called. That is all the new patients, male patients generally speaking, who come into the hospital come into that department first.

The CHAIRMAN. Is it a part of your duty to examine them, when they come into the hospital?

Dr. STACK. Yes, sir.

The CHAIRMAN. How many physicians are there under you, in this receiving building?

Dr. STACK. One physician.

The CHAIRMAN. You two physicians examine all the male patients who come into the hospital; do you?

Dr. STACK. No; I said generally speaking, because the colored patients and those who come there as prisoners or criminals go to another service. With that exception Dr. Glasscock, my colleague, and I look after and examine the other patients.

The CHAIRMAN. How many patients are there in this receiving department that you have charge of?

Dr. STACK. In round numbers, 450 to-day.

The CHAIRMAN. About how many are received in the course of a year, who come under your direct observation?

Dr. STACK. Perhaps 300 or more. I should rather think more than that than less.

The CHAIRMAN. That is nearly one a day?

Dr. STACK. Yes, sir.

The CHAIRMAN. How long do the patients who come into the receiving hospital usually remain before they are sent to other portions of the institution?

Dr. STACK. The time would be very indefinite, indeed. Exigency cases, on account of the overcrowded condition of some portions of the hospital, might necessitate their transfer almost immediately.

Mr. SMYSER. Why?

The CHAIRMAN. On account of the overcrowded condition of the hospital service. There are only a certain number of beds.

Mr. SMYSER. Is that the only reason?

Dr. STACK. I was going to add that we try of course to meet emergencies by keeping vacancies there for those who come in.

Mr. SMYSER. Is there any other object or purpose in keeping them in the receiving hospital for the purpose of observation as to where eventually the patient should go?

Dr. STACK. Yes, sir; that is the idea.

The CHAIRMAN. So that it would be impossible to fix any usual time?

Dr. STACK. It might be only a couple of days; but we usually like to keep them there a week at least.

The CHAIRMAN. For personal observation?

Dr. STACK. Yes, sir.

The CHAIRMAN. How often do you see the patients in the ward of which you have charge?

Dr. STACK. You know I have charge of a number of wards.

The CHAIRMAN. I mean in that department.

Dr. STACK. It is impossible to say accurately; but the routine is to visit the wards regularly twice a day, morning and night. I might go as often as six times into one ward. For instance, in our acute ward I suppose seldom a day passes that I do not go four times in that special ward.

The CHAIRMAN. But you visit all of the wards twice a day regularly?

Dr. STACK. Yes; there would be some days when I would only go through once. But you must remember that my colleague, Dr. Glasscock, also makes his rounds in addition to mine. If I should happen to be absent he would be there and would make his rounds, and he would make the same number I would.

The CHAIRMAN. So there never is a time when either you or Dr. Glasscock does not visit the wards at least twice a day?

Dr. STACK. I am sure there is not a time in which the wards are not visited twice a day by Dr. Glasscock and myself, separately and together. We might go in four times in a day, that is he would go twice and I twice; or he might go once and I would go once in a day into everyone of them.

The CHAIRMAN. Do the nurses, supervisors, and other attendants report either to you or Dr. Glasscock at any regular time?

Dr. STACK. The supervisors have to make a regular report to the Superintendent every morning at nine o'clock.

The CHAIRMAN. That does not go through you?

Dr. STACK. When the supervisor comes to make his report, prior to taking it in, he generally has some small requisitions for the Superintendent's signature, which I have to countersign, so that he comes to me at that time and always reports anything that may have happened.

The CHAIRMAN. Do you generally examine those reports before it is submitted to the Superintendent?

Dr. STACK. I usually glance over it, but it is not my function, because that is a special report from the supervisor of each department to the Superintendent himself, and I could not alter it.

Mr. SMYER. Do you examine it to see that it is all right?

Dr. STACK. I do. I always examine it every morning.

Mr. SMYER. In case there has been any unusual occurrence during the preceding twenty-four hours, would that be promptly reported to you?

Dr. STACK. It would be reported directly to me verbally, and it would also appear on this report.

Mr. SMYER. Then if there was an unusual occurrence in the way of a disturbance among the patients, it would be reported to you forthwith?

Dr. STACK. Yes, sir.

Mr. SMYER. How; by telephone?

Dr. STACK. Either by telephone or by the supervisor, to me personally.

Mr. SMYER. What would you do under such circumstances? Would you go immediately to visit the ward where the unusual occurrence took place?

Dr. STACK. Yes, sir; that is the usual method. I would do that.

Mr. SMYER. How long do you say you have been in this particular department, in charge of the receiving of patients?

Dr. STACK. That receiving service has only been in operation during the last year or year and a half.

Mr. SMYER. You have been the head of it ever since it has been established?

Dr. STACK. Yes, sir; I have been responsible for it.

Mr. SMYER. During that year and a half you have been at the head of that service. Have you ever received any reports of cases of cruelty on the part of attendants to patients?

Dr. STACK. I do not recall any specific report of cruelty. I have received reports of neglect.

Mr. SMYER. Of neglect?

Dr. STACK. Yes, sir; for which the attendants were discharged.

Mr. SMYER. How many cases of that character, in round numbers, as nearly as you can recall it?

Dr. STACK. Two that I am sure of.

The CHAIRMAN. Tell us about them.

Dr. STACK. One was for allowing a patient to be untidy at night—helpless patients who were bedridden and unable to attend to their wants. The other was for allowing an aged man, who was also helpless and bedridden, to fall out of bed and sustain a fracture about the hip joint.

The CHAIRMAN. What was the name of that man?

Dr. STACK. The man who was discharged?

The CHAIRMAN. No; of the patient; was it Butts?

Dr. STACK. No, it was not Butts.

The CHAIRMAN. What was the name of the attendant; Do you know what ward it was in?

Dr. STACK. Yes, sir; it was in B 3.

Mr. SMYSER. You do not recall now the names of the patients or the attendants?

Dr. STACK. I know exactly who they are; but my memory for names among so many is not good, and I can not recall just the names. I know exactly who the patients and attendants are.

Mr. SMYSER. You could draw a picture of them?

Dr. STACK. I could; but I do not think of their names at once. As a matter of fact, the superintendant has received a letter from this nurse complaining that I did him an injustice; but he is mistaken about that.

Mr. SMYSER. He was discharged immediately after you made an investigation of this matter?

Dr. STACK. Yes, sir.

Mr. SMYSER. Upon your recommendation?

Dr. STACK. Yes, sir.

Mr. SMYSER. What is the other case you spoke of, when you were satisfied that the attendant had been neglectful of his duty?

Dr. STACK. Yes, sir; I was satisfied of that for a very good and sufficient reason.

Mr. SMYSER. What was it?

Dr. STACK. The case had not been reported to us. It was discovered by the medical officer in the morning, by myself.

Mr. SMYSER. That was the case where the man fell out of bed?

Dr. STACK. Yes, sir; it was reported by the day nurse, and I went and examined him with Dr. Glasscock and found out his condition.

Mr. SMYSER. What was the other case you remember specifically? First, when did the first occurrence take place of which you speak?

Dr. STACK. I should say within the last year. Perhaps a year ago.

Mr. SMYSER. Now give us the second one.

Dr. STACK. That was for leaving certain patients that were found in an untidy condition in the morning after a reprimand had occurred.

Mr. SMYSER. Do you know the name of that attendant?

Dr. STACK. I will try to think of his name.

Mr. SMYSER. Never mind about that. About when did that happen?

Dr. STACK. I should say that happened within six months.

Mr. SMYSER. Was the attendant in charge in that case?

Dr. STACK. Yes, sir.

Mr. SMYSER. Upon your recommendation?

Dr. STACK. Yes, sir.

Mr. SMYSER. You investigated the matter and found the charge was true and you thought that he was therefore unfit to be an attendant in the hospital?

Dr. STACK. Yes, sir.

Mr. SMYSER. Are there any other cases you think of particularly?

Dr. STACK. There are a great number of similar cases that have occurred from time to time since my connection with the hospital; but

I can not recall the specific cases just now. I know that in every case where there was abuse of a patient the matter was diligently looked into and proper action taken in protecting the rights of the patients in every instance. In fact, the superintendent has always felt and has always insisted that there was reasonable ground for criminal action against attendants who would mistreat patients and that we were responsible for it if it was not done.

MR. SMYER. For the purposes of discharging attendants did you classify neglect toward patients in the same category with actual abuse?

DR. STACK. Yes; for the purposes of discharge; but as a matter of fact, where there is doubt in the evidence pro and con, we always give the benefit of the doubt to the patient, although that sometimes seems to operate with injustice toward the attendant. For instance, Dr. White discharged a man and prosecuted him in the Police Court, and the man was discharged by the jury. He insisted that he still was an attendant there and that we had done him an injustice, and I suppose he will go to his grave thinking that.

MR. SMYER. What was the name of that attendant?

DR. STACK. I think his name was Hall.

MR. SMYER. That case was directly under your care?

DR. STACK. Yes, sir.

MR. SMYER. That was for actual physical violence toward a patient?

DR. STACK. Yes, sir.

MR. SMYER. What did that attendant do to the patient or what was he accused of doing?

DR. STACK. I have forgotten at this time.

MR. SMYER. How long ago was that?

DR. STACK. I should say it was two years ago.

MR. SMYER. Are there any other cases where it has been reported to you that there has been actual personal violence used toward the patients under your care in the last year and a half, since you have had charge of this receiving station?

DR. STACK. I can not recall with certainty any individual case now; but there may have some occurred. It can be taken as an absolute matter of fact that there was no case reported to me that was overlooked by me in any way or manner.

MR. SMYER. Either of violence or negligence?

DR. STACK. Either of violence or negligence.

THE CHAIRMAN. Now, tell us something about the food in the hospital given to patients, and what you think of it?

DR. STACK. I think that the food is liberal and of good quality. I eat the same myself—that is to say, the same quality of food.

MR. SMYER. It is prepared specially where you eat, is it not?

DR. STACK. Yes; but even then, you know, there are those who say that it is not properly prepared. That is a hard problem. I think it is prepared well and palatably, and that the provisions are sufficient for everybody.

THE CHAIRMAN. Are eggs frequently served to patients?

DR. STACK. Yes, sir; we use a great many of them. Of course I could not give the number.

THE CHAIRMAN. Are eggs on the regular bill of fare?

DR. STACK. Yes, sir; and not only that but we use eggs in great

quantity in egg nogs for the sick and feeble, of whom we have a great many under our care. We have a very large number of aged people who require a light diet and are unable to masticate their food properly, and also who have a weak digestion. We use eggs and milk a great deal in that way.

The CHAIRMAN. That particular and special diet is used under your direction?

Dr. STACK. Yes, sir; it is upon the order of the physicians in all cases.

The CHAIRMAN. How is the butter?

Dr. STACK. The butter is a problem that has caused some annoyance. We use oleomargarine. Of course that is largely a matter of taste. I have become habituated to the use of it.

Mr. SMYER. What do you say about having a cultivated taste for oleomargarine?

Dr. STACK. I say that one can become habituated. There is one advantage in oleo over butter, and that is it does not become rancid like butter does, because there is no milk left in it after very improper churning.

The CHAIRMAN. Do you doctors use this oleomargarine, as well as the patients?

Dr. STACK. Yes, sir; just the same, all the time.

The CHAIRMAN. In regard to bathing patients: How is that done in the receiving department?

Dr. STACK. We are very scrupulously attentive to the bathing of patients.

The CHAIRMAN. What system do you use? The shower or tub?

Dr. STACK. We have both in the same bathroom, in the new building. We have a shower and a bath tub also; but we preferably use the shower bath where the persons are strong physically and can stand it. The custom is invariable that when a person is received into a ward, if it is not physically impossible in some way, that he shall take a bath immediately under the eye of one of the supervisors, who inspects him for cleanliness and for any cutaneous disease or anything of that sort. Then, if he is ordinarily cleanly in his habits, he is bathed regularly once a week, also under the direct supervision of the attendant.

We have a regular schedule of bathing days for each ward. Of course you can understand that some of our patients have to be bathed many times during the twenty-four hours. They are simply children of larger growth and are utterly helpless, just the same as an infant in arms, and they have to be attended to and bathed night and day.

The CHAIRMAN. Did you ever know of any case where the patients were bathed in the same water, without the tub being emptied?

Dr. STACK. No, sir; I never did. Of course that would be a matter for discharge.

The CHAIRMAN. Under the rules and regulations that would be a matter for immediate discharge?

Dr. STACK. Yes, sir; that could not be done systematically. It might be done once or twice. For instance, there are two adjoining wards and they are both on the same floor. A supervisor will patrol from one ward to the other, and in the interim of his absence for a few

minutes advantage of it might be taken by an unscrupulous attendant to use the same water twice; but I do not think it could be done systematically. I know it could not be done without being found out. Of course it would only be done occasionally.

The CHAIRMAN. If it was found out, it would result in the immediate discharge of the attendant?

Dr. STACK. Yes, sir.

Mr. SMYSER. Suppose the supervisor did not report it?

Dr. STACK. The supervisors are men who have been long in the service and are honorable men. I could not conceive of one of them failing to do his duty in that respect.

The CHAIRMAN. There would be no object in a supervisor failing to report a case of that kind?

Dr. STACK. No object in the world, except it might be favoritism; and I have never known an instance of that among the supervisors, because they are men who have served there for a long time and whose personal integrity and character is good.

The CHAIRMAN. Are the supervisors and attendants under you generally men of good character?

Dr. STACK. Yes, sir; otherwise they would not be under me. There may be some few cases that would elude me. Such attendants may have crept into the service from time to time; but those men are always separated from the service very promptly.

The CHAIRMAN. Do you think that the general discipline of the asylum is good, so far as it relates to the regulations prescribed for the attendants? Do you think it could be improved in any way?

Dr. STACK. I think that the rules and regulations governing the nurses and attendants are good and liberal. They could only be improved by lessening their hours of work, and that would necessitate a very considerable increase in the number of attendants and nurses.

The CHAIRMAN. In other words, the good of the patients is concerned, entirely apart from the economical question. Do you think that matters there could be improved by having a greater number of attendants?

Dr. STACK. Assuming that we have our full corps of attendants all the time, I think there is a reasonably sufficient number for the benefit of the patients. I know that the eight-hour method has been suggested. That, I am sure, would not redound to the benefit of the patients, because our attendants and nurses are, generally speaking, intelligent and humane people, and they become attached to their patients. They live on the ward with them. It is just like living in the same house. They become friendly and interested.

The CHAIRMAN. You think, then, that an attendant who works from 6 until 5 on one day and from 6 until 8 on another day, taking into consideration the evenings off and the holidays that they receive, is not too great an amount of work for the attendants to perform?

Dr. STACK. It is. The hours are long and the duties are arduous, yet the same may be said as to the medical officers. They have no time off. They do not have Sundays and holidays.

The CHAIRMAN. The medical officers are on duty how long? What are your hours of duty, for instance?

Dr. STACK. 24 hours in the day, constructively—in reality.

The CHAIRMAN. Of course if you desire you can go away in the evening for a short time, leaving your assistant in charge?

Dr. STACK. I can not, and none of the medical officers can leave the reservation without reporting first to the superintendent.

The CHAIRMAN. Special permission would have to be given?

Dr. STACK. Yes, sir. He has to know.

The CHAIRMAN. It is practically as it is aboard a man-of-war, I suppose?

Dr. STACK. He would have to know who was on duty in the hospital, so he could make his dispositions.

The CHAIRMAN. But there is no fixed special time which the doctors have?

Dr. STACK. They take the time as best they can, if they can get a vacation; but frequently several years elapse before they do; and vacations do not accumulate.

The CHAIRMAN. Do you know about a patient named Kinsey?

Dr. STACK. Kinsey was under my care; yes, sir.

The CHAIRMAN. Was there ever any complaint made to you in regard to any improper treatment of Kinsey?

Dr. STACK. Yes, sir.

The CHAIRMAN. What was the complaint?

Dr. STACK. Kinsey had his ribs fractured by another patient—a man named Hoppenheimer.

The CHAIRMAN. Did you personally examine that case?

Dr. STACK. Yes; I examined him and took him right to the sick ward at once.

The CHAIRMAN. When did this happen? In the daytime or at night?

Dr. STACK. It was about breakfast time in the morning, I should say.

The CHAIRMAN. Was it a case of a fight between the patients?

Dr. STACK. Yes, sir. This Kinsey, when he first came, was in a very turbulent and frantic condition—in a state, rather, of delirium—and he was noisy and threatening and demonstrative, and this other patient insisted that he purposely made demonstrations toward him, and especially kept him awake at night, or had the night previously. So Hoppenheimer stated to me. The matter was brought up in court on a writ of habeas corpus that Hoppenheimer sued out subsequently.

The CHAIRMAN. Hoppenheimer did what?

Dr. STACK. Hoppenheimer sued out a writ of habeas corpus, and the matter came up in court about the fracture of this man's ribs, and he justified himself by saying to the judge and jury, "You ask Dr. Stack. That is the best thing that ever happened to Kinsey." He said, "Dr. Stack will tell you that he is the best patient he has now, and Dr. Stack is going to discharge him as recovered."

The CHAIRMAN. Was the man cured, as a matter of fact?

Dr. STACK. He was cured subsequently, but under treatment we find that that form of insanity is rather paroxysmal, or recurrent in nature. It recurs at regular intervals.

The CHAIRMAN. A great shock may produce delirium and a great shock may cure it?

Dr. STACK. It may be contributory to a cure.

Mr. SMYER. That is the way David Dodd was cured, in Hard Cash.

The CHAIRMAN. What do you know about the case of Daddysman?

Dr. STACK. Daddysman was a patient under my care, I think, on two or three occasions. I occasionally see him now.

The CHAIRMAN. Was there ever any complaint made in regard to his having been injured in the hospital?

Dr. STACK. Surely there was no abuse or injury of any magnitude. I am certain my memory serves me right in that respect.

The CHAIRMAN. This man Daddysman stated that he did not make any complaint of any injury, because he said it would not do any good—that no attention would be paid to it.

Dr. STACK. He knows better than that.

Mr. HAY. And that if he wanted to get out, the best way to get out was to keep quiet.

Dr. STACK. Daddysman is a friend of mine, and he knows I would not tolerate his being injured.

The CHAIRMAN. How about Shuster? What do you know about him?

Dr. STACK. He was under my care.

The CHAIRMAN. Is there anything to be specially mentioned in connection with his case?

Dr. STACK. Yes; Dr. Glasscock and I treated him just as we would have treated our own brother under the circumstances. We cared for him when he was sick, we visited him, I suppose, a half dozen times a day, and cared for him, as I say, as we would have cared for our own brother. He never made any complaint; he had no cause to make any complaint. He might have had some words with somebody, or something of that sort, because he is naturally of an irritable disposition; but I knew him and I knew his brother, and he knew that if there was anything wrong he could come to me with every confidence that it was going to be redressed.

The CHAIRMAN. What do you know about a patient named Henry High?

Dr. STACK. He was under my care at different times from time to time. He has not been under my care for several years back. He has been in the hospital quite a number of years. I do not think he has been under my care. I know the patient well, though, but he has not been under my care recently.

The CHAIRMAN. Doctor, would bad language to patients on the part of attendants be tolerated by you or Dr. Glasscock?

Dr. STACK. No, sir; absolutely not, and we correct it. When young attendants come in, we reprimand them for an improper tone of voice, harshness in talking to the patients. Bad, abusive, or profane language is absolutely prohibited, and the person who uses it is subject to dismissal. That is a regular rule of the hospital; but we even do not permit a harsh tone of voice. We rather go on the principle that the people there are irresponsible and should not be addressed in that way and that resentment should not be shown by anyone.

The CHAIRMAN. Do you know anything about feeding-tubes? Did you ever have to feed patients with the tubes?

Dr. STACK. Yes, sir.

The CHAIRMAN. Well, that is never done except when it is necessary, because the patient will not eat? Is there any other reason for doing it?

Dr. STACK. The first intimation I ever had of any other reason is in what I see in the newspapers.

The CHAIRMAN. It is a disagreeable operation for a physician to have to perform, is it not?

Dr. STACK. Yes; it is extra work, and unpleasant ordinarily.

The CHAIRMAN. You never heard of anything of that character being done by a patient?

Dr. STACK. Never in my life until I saw it in the paper.

The CHAIRMAN. Or by a physician for vindictive purposes?

Dr. STACK. No, sir; it would be absurd to think of it in that way.

Mr. HAY. Did you ever have an attendant under you by the name of Edgar Ball?

Dr. STACK. Yes, sir.

Mr. HAY. He testified that sometimes it would be a couple of weeks before any of the physicians came through his ward. What have you to say about that?

Dr. STACK. That is absolutely an erroneous statement, sir.

Mr. HAY. Then there is a Mrs. Washburn, who had a husband there. Do you know anything about his case?

Dr. STACK. Yes, sir; for a short time when he first came into the hospital he was under my care, but all the rest of the time he has been in another service, under Dr. Logie.

Mr. HAY. That is right; she said she complained to Dr. Logie. Now, Doctor, there is a Mrs. Goodrich, who claims that you prohibited her from coming on the grounds of the asylum. What about that?

Dr. STACK. I never prohibited her from coming onto the grounds, but I prohibited her for sufficient reasons, that were known to the superintendent and others, from visiting the patients in the wards. That was done after a long time and after great forbearance.

Mr. SMYSER. Well, give us a touch of that and let us judge.

Mr. HAY. What were the reasons that induced you to give those orders, Doctor?

Dr. STACK. Well, she and some other women used to come there and hold quasi-religious services. The superintendent is very liberal about those matters, but this was something of a highly emotional and demonstrative form of religion, and it was for that reason—

Mr. SMYSER. Do not be afraid. I am the only church member on this committee.

The CHAIRMAN. I beg your pardon.

Dr. STACK. As I say, this seemed to be a highly emotional form of religion, and a very personally demonstrative one, so the thing had to be interdicted. It became a matter of scandal, and the janitresses about the hall would complain.

Mr. SMYSER. Was that the reason you excluded this lady?

Dr. STACK. That was the only reason I excluded her. I did not prohibit her from coming on the grounds at all, or from seeing him when he was out walking or anything like that; but I did prohibit her from going into the wards.

Mr. SMYSER. You say seeing him. You mean Mr. Marshall?

Dr. STACK. Yes, I supposed you refer to Marshall. Marshall was the friend she came to visit.

Mr. HAY. You say for a year and a half you have been in charge of the receiving ward. What were you doing before that time?

Dr. STACK. I said a year and a half in charge of the receiving service as now constituted. The new buildings at about that time were occupied first. Prior to that I had been doing essentially the same service in the hospital, but in different quarters in the old building.

Mr. HAY. You said you have under your control now 450 patients?

Dr. STACK. At the present time.

Mr. HAY. How are they divided up—into how many wards?

Dr. STACK. I think there are sixteen, all told.

Mr. HAY. How many attendants on each of those wards are there, day and night?

Dr. STACK. The total number is about 63.

Mr. HAY. Sixty-three attendants on those sixteen wards?

Dr. STACK. Yes, sir; that is our roster.

Mr. HAY. Are they always there? I mean have you your full quota of attendants all the time?

Dr. STACK. At the present time I think we are two attendants short. That is an ordinary incidental occurrence.

Mr. HAY. How many supervisors have you in those sixteen wards?

Dr. STACK. We have three.

Mr. HAY. How many assistant supervisors?

Dr. STACK. By that I mean one chief and two assistant supervisors, making three in total.

Mr. HAY. Those supervisors do not come in contact with the patients for the purpose of taking care of them, do they?

Dr. STACK. Yes, sir; oh, yes. Those duties are very important in that respect. I can only liken a supervisor to a first sergeant of a company, who is directly between the men and the commanding officer of the company. That is to say, he is responsible directly to the superintendent, and they overlook the lieutenant, such as assistants like myself, in an important case. He goes there and he inspects their meals; he goes and inspects their food; he is responsible for their clothing. He makes a frequent trips through the wards, and anything like a person being taken sick or having an eruption or anything like that—small minor matters; major or minor for that matter—he reports at once to one of the medical officers. The supervisor has important duties in direct connection with the patients all the time.

Mr. HAY. You have an attendant at the head of each ward?

Dr. STACK. Yes, sir; a charge attendant, who is responsible for the ward.

Mr. HAY. Do you have more attendants on one ward than you do on other wards?

Dr. STACK. Yes, sir.

Mr. HAY. What does that depend upon?

Dr. STACK. That depends on the number of sick in the wards. The number of those who are suffering from acute mental trouble in which there is a display of excitement or different dangerous propensities, such as a tendency to self-destruction or to homicidal attempts.

It also depends on the class of patients who are more or less prone to violence on account of their peculiar hallucinations or delusions, but who are physically well, you know, but who need to have some one there who when they get in a troubled frame of mind—believing that people may be talking about them, swearing at them, or speaking in abusive language to them, so that they become demonstrative—can raise his hand and quiet them. It is necessary to have them there.

Mr. HAY. What is the largest number of attendants you have on any one ward?

Dr. STACK. Four, I should say.

Mr. HAY. Four in the day and how many in the night—or do you mean four all together?

Dr. STACK. No; four in the day.

Mr. HAY. And what about at night?

Dr. STACK. Let me think a moment. Including the chief nurse—there is one that is in the B building, where all the acute cases come—there are five—that is, including the chief nurse, Miss McLanahan. She is on duty in that ward specially, but she patrols the rest of the building. There are two night nurses on the same ward and one in each of the others in the B building.

Mr. HAY. And do you think that those 63 attendants are sufficient for the care of these patients—of 450?

Dr. STACK. I think that with reasonable diligence they can perform their duties satisfactorily. Of course, an ideal condition would be to have more.

Mr. HAY. How many more, Doctor?

Dr. STACK. You, know, that is rather a difficult question to answer. Considered from an economical standpoint, I think there are few, if any, public institutions that have a much larger percentage.

Mr. HAY. I understand, but we are not considering it from an economical standpoint. What I want to get at is whether or not an increase in the number of attendants upon the patients under your care would be for the interest of the patients.

Dr. STACK. Yes.

Mr. HAY. Could they be more looked after and taken care of more carefully than they would be with the present force that you have?

Dr. STACK. Yes; I should answer that with an increased force we could, that the patients could be looked after more carefully. We could detail special attendants to a special case that needed attention and which would have his undivided attention. If we had an increased force we could do that. Instead of detailing one attendant to look after a dozen men we could have him look after a half a dozen who are helpless and in bed and who need attention constantly.

Mr. HAY. With an increased number of attendants could you dispense with some of the restraints which you now necessarily have to use?

Dr. STACK. Speaking of my own service, I do not think I have used any restraint for the last couple of months.

Mr. HAY. Do you not use any restraint at all?

Dr. STACK. Very rarely.

Mr. HAY. So that the increase of attendants would not affect that part of the treatment?

Dr. STACK. It would at times. Those things appear to run in cycles. There are periods of some years—not every year, because a number of years may elapse in which the cycle does not occur—when you will get a number of actively violent people, as though the disease were epidemic almost. You might have a half a dozen, and then, of course, you are put to all resources to control them.

Mr. HAY. Then it is true that with an increased number of attendants in cases of that kind, when these periodical spells of violent patients come, you could dispense with some of the restraint?

Dr. STACK. Yes, sir.

Mr. HAY. What is the character of this restraint that is used there? Is it of such a character that it ought to be dispensed with if it could be by any means?

Dr. STACK. No, sir; I do not know that it works any hardship on

the patient when we employ it at all. Of course we are very reluctant to use it, and only as a very last resort, and to protect the patient from himself, or to protect others from him. Then it is only used for the very shortest interval, and when a man has this camisole, this canvas jacket with the long sleeves on it, placed upon him, supposing that it is necessary, the hours are numbered on the superintendent's report, showing how many hours, the patient's name placed opposite, etc.

Mr. HAY. So that the superintendent knows how long each patient has been kept in it?

Dr. STACK. Yes, sir; that report is brought in every morning, so that if one of the medical officers were using any restraint, or using it continuously, and he did not make a personal verbal report to the superintendent, the superintendent would want to know why he was using the restraint in that way.

Mr. HAY. Since Dr. Clark has been made practically the superintendent of all of the clinical departments, the treatment of patients, as I understand it——

Dr. STACK. Yes, sir.

Mr. HAY. Since the new system has begun over there, what duties does the superintendent perform? What are his duties, if you know?

Dr. STACK. He has general supervision of the care and welfare of the entire reservation, of everything, including the patients, and to see that the medical officers, the supervisors, and attendants perform their duties; and all of the departments, such as the storekeeper's and housekeeper's departments are properly conducted. He is also a consulting physician for the medical officers, when the medical officers have a case that is either puzzling to them or which demands special attention; or, if a patient needed restraint I would not restrain him without first going to the superintendent and reciting the case.

Mr. HAY. Then, as I understand it, each case is reported every morning to the superintendent where there has been any treatment, either of restraint or any other sort.

Dr. STACK. Yes, sir; that is a matter that is on a tabulated sheet. Every supervisor brings in his own tabulated report.

Mr. HAY. How many supervisors are there in the institution?

Dr. STACK. There are at least two for each department, and there are, I think, six departments, speaking off-hand.

Mr. HAY. So that there are twelve head supervisors?

Dr. STACK. There are twelve supervisors; yes, sir.

Mr. HAY. And how many assistant supervisors?

Dr. STACK. There would be one head supervisor for each department, and two of the departments have two assistant supervisors—that is, my own and what is known as the detached buildings.

Mr. HAY. So that the superintendent has to receive these twelve or fourteen reports——

Dr. STACK. Oh, no; one from each department. The chief supervisor brings in the report.

Mr. HAY. So that he receives six reports?

Dr. STACK. Yes, sir; a report from each department, every morning.

Mr. HAY. Then he has charge of the grounds, I suppose, and has general supervision?

Dr. STACK. Yes, sir; everything.

Mr. HAY. How often, Doctor, for instance, have you consulted with the superintendent about any case in the last twelve months?

Dr. STACK. In the last twelve months?

Mr. HAY. Yes.

Dr. STACK. A number of cases, surely, every Sunday. For instance, the uniform method in my service is that every Sunday morning he comes in with myself and Dr. Glasscock and inspects every man who has been admitted during that last week.

If men are convalescent or if their condition is so far improved as that, it might admit of their discharge from the hospital, or if they had sufficiently recovered to admit of their discharge, they are all mustered at one building. At that one building he inspects and talks with those men, and we consult with him as to the advisability of discharging them. That is a regular practice every Sunday. Of course if there is any case at any time, he expects me to report to him every morning as well as the other physicians, or sometimes during the day. Usually he prefers it in the morning, but he may be occupied, so we are bound to see him sometime during the day to report in a general way about our service.

Mr. HAY. Doctor, a great deal of evidence has been given here about cruel treatment of patients. I would like to know about it. Take, for example, the sixteen wards over which you exercise supervision, and which are under your control. Is it not possible that these cases which have been detailed here might have occurred without your knowing anything about it?

Dr. STACK. It is possible, of course. Undoubtedly those things have occurred, because they have been found out; and they may be done by a given attendant for a certain length of time. The cruelty would always be clandestine and intermittent, and it could not be systematically done for any length of time without being found out; of that I am certain, and I am also equally positive in making the statement that no case of abuse has ever come to the attention of myself without being reported to the superintendent, if it ever did come to my knowledge. I might just as well publish it in the papers, because he would be bound to know it inside of twenty-four hours or forty-eight hours. It would be foolish as well as criminal for me to overlook such a thing.

Mr. HAY. Can you recall, in your years of service there, as to how many attendants have been discharged for reasons of that sort, for neglect and cruelty? I do not mean during the whole twenty-nine years, but say for five or four or three years back?

Dr. STACK. Let us say for five years past. Do you mean in the whole hospital?

Mr. HAY. Yes; well, of course, you might not know about that.

Dr. STACK. Possibly a dozen that have come within my knowledge, and I would probably know nearly every instance of discharge for cruelty in some way—either incidentally or by actual report to me.

Mr. HAY. If any cruel treatment is practiced there by these attendants you say that it could not be done for any length of time?

Dr. STACK. Oh, I am certain it could not.

Mr. HAY. It would ultimately be found out, and the attendant would be discharged?

Dr. STACK. Yes, sir; and, as a matter of fact, the medical officers,

and the supervisors are able to form an estimate of those men whose actions, or whose characters, they regard as suspicious.

Mr. HAY. And when you suspect a man of that kind you keep a careful watch over him?

Dr. STACK. Yes, sir.

Mr. HAY. What is the character of the employees that you obtain out there as a general thing?

Dr. STACK. I think we are rather fortunately situated in that respect. Most of our attendants are men and women, young people, who come directly from their homes in the neighboring counties of Maryland and Virginia and from the city of Washington. The young people are more plastic, and they are just out of the home influences, and they make as a rule better attendants. In fact, the policy of the hospital has been distinctly against employing attendants who have served in other hospitals. It has been occasionally done, but the superintendent has always required the strongest personal recommendations from the superintendent of the other hospital.

Mr. HAY. You prefer to train your own employees?

Dr. STACK. Yes, sir; and for that purpose there has been recently, or some few years back, organized a training school in the hospital in which we train them.

Mr. HAY. The supervisors' pay, for instance, is how much now?

Dr. STACK. From \$45 to \$55, I think.

Mr. HAY. And besides that they get a home there with their board and lodging.

Dr. STACK. Most of the supervisors are older men, and they are married and have families outside, but they get their food there and their lodging if they wish it.

Mr. HAY. Do you consider the salary there is sufficient compensation to obtain good men for positions of that sort?

Dr. STACK. We have always been able to get good men for our supervisors—excellent good men; and the rate of pay compares very favorably with that of the Hospital Corps in the Army; that includes first-class sergeants and sergeants.

Mr. HAY. What does a first-class sergeant get in the Hospital Corps?

Dr. STACK. It is my impression that he gets exactly the same pay that one of our assistant supervisors gets—\$45. I am not speaking from personal knowledge, but I just saw the list——

Mr. HAY. Well, I happen to know.

Mr. SMYSER. We have it here.

Mr. HAY. But then he has this advantage, that when he serves a certain length of time he gets out of the service on pay; he retires on pay.

Dr. STACK. Yes; after twenty years of service.

Mr. HAY. How do you regard the compensation of the other employees, Doctor? Do you regard it as fair compensation, such as would enable you to get a class of attendants such as you require?

Dr. STACK. For the services of an attendant, well rendered, I do not think any pay is too high, as a matter of fact; but the pay of our attendants, I think, would compare well with that of any other hospital. I know it would.

Mr. HAY. Do you get a class of attendants who remain with you?

Dr. STACK. Yes, sir; for years, many of them.

Mr. HAY. I would like to get an estimate or a statement showing the average length of service of the attendants now at the hospital. I think that would be interesting. Of course you could not give us that?

Dr. STACK. No, sir; it would be impossible for me to give that now.

Mr. HAY. There has been some talk here about the criminal insane. Are they systematically separated from the other patients?

Dr. STACK. Not systematically. Of course a medical officer has to consider his patients, and I think the very purpose of Congress in appropriating money for the erection of that Howard Hall building for the criminal insane included homicidal patients. I think that is the wording of it.

Mr. HAY. So that when you have a homicidal patient you put him in with the criminal insane?

Dr. STACK. We put him there for this reason. The building is peculiarly constructed. It has fewer patients to a ward. Each ward is smaller. He is not brought into contact with so many people. There are only 15 patients in each ward and each man has his own room. Then I believe the percentage of attendants and nurses there is larger than elsewhere in the hospital. The mere fact that a patient is sent there does not indicate that he will stay any length of time. He may be there only for a short time. He may be in an impulsive condition, which may only last a limited period, and he is transferred to other wards as soon as his condition will admit of it.

As a matter of fact I have been taking men into my service from the Howard Hall service. Well, I suppose I have taken dozens there in the past three months, men against whom there was no indictment or criminal charge pending or conviction, but who had been put there on account of homicidal acts, and who had subsequently got into that condition. That is going on all the time.

Mr. HAY. Are there any people there who have been convicted or who are under charges of crime, and who are allowed to go elsewhere and be taken care of? For instance, have you any under your care?

Dr. STACK. I have a number who have been in Howard Hall.

Mr. HAY. Are they men who have been convicted of crime, who are under charges of crime, any of them?

Dr. STACK. They have been under charges, surely. Then I have one case particularly in mind, a soldier who shot and killed an officer and wounded a couple of his comrades when they were out on a scouting expedition. The man was tried before a civil court out in Montana, I think.

Mr. HAY. Why was he taken from the criminal insane and put with these others?

Dr. STACK. Because his term of sentence had long since expired, and his mind in the meantime had regained a partially normal and almost normal condition—he had not entirely recovered.

Mr. HAY. Is that the only case you have?

Dr. STACK. Oh, no. There may be others of those who have been in Howard Hall under sentence.

Mr. HAY. Either under sentence or who are under charges?

Dr. STACK. Well, there was a Mr. Hamilton, but I think in that case he was found not guilty by reason of insanity. That of course would place him, from a medical point of view, on the same basis as the other patients. He was at Howard Hall after he first came there,

when his mind was obscured. Then there was a man named Whitney Hall, who has recently come under my care from Howard Hall; but his case is the same. That is to say the jury found——

Mr. HAY. He was charged with an offense, and the jury found him insane and did not try him for the offense?

Dr. STACK. No; they found him not guilty, I think, is the language of the verdict, on the ground of insanity. As a matter of course all those patients come directly from the jail, or from the care of the marshal or the wardens, and they naturally, as a matter of routine, go to Howard Hall, to the criminal place. Then in the course of time if their mental condition justifies it they may be transferred.

Mr. HAY. From your long experience in the treatment of the insane, and the treatment you also have had there of a large number of epileptic patients as I understand it, do you think it would be a wise thing for Congress to have a separate place for these epileptic patients? I mean outside of St. Elizabeth's, somewhere else?

Dr. STACK. No I do not see how anything could be accomplished by that. If the hospital was overcrowded than I should say yes.

Mr. HAY. Then the hospital is not overcrowded?

Dr. STACK. No, sir; the hospital is ample. In the last provision made by Congress, they made provision for some little time ahead, in the way of the reception of patients without overcrowding.

Mr. BARCHFELD. How long have you been connected with the institution there?

Dr. STACK. About 29 years, sir.

Mr. BARCHFELD. That is quite a service.

Dr. STACK. Yes, sir.

Mr. BARCHFELD. They have made wonderful strides in the study of the treatment of insanity in that time, have they not?

Dr. STACK. The whole face of the problem has changed since I have been connected with it.

Mr. BARCHFELD. Can you tell us what were the methods of restraint that were employed when you first went to that institution?

Dr. STACK. The rules governing the use of restraints were then altogether different from what they are now. At that time the attendants could restrain a man, but it was a matter that they would have to report to the supervisor. The number of cases of restraint has been gradually cut down there year after year, and those who have the power of using restraints have had that power curtailed. For instance, in a recent order of Dr. White's prohibiting the use of it altogether, where formerly the medical officers had the power, they have now not the power without conferring with the superintendent.

Mr. SMYSER. Suppose Dr. White was away and you would see a patient there that ought to be restrained. Would you wait until he returned before you would give the order?

Dr. STACK. No; because he being away would necessarily, constructively at least, leave me in charge, and I would use my own judgment in the matter; but I would be responsible, and I would have to make my case good to him when I reported.

The CHAIRMAN. Would you be acting superintendent?

Dr. STACK. Yes, sir.

Mr. SMYSER. I want to get below some fellow who is acting superintendent.

Dr. STACK. One of the other medical officers?

Mr. SMYSER. Yes. Would he take the responsibility in a proper case of restraining a patient and then reporting it?

Dr. STACK. I think he would, but he would immediately have to report the matter.

Mr. SMYSER. Would it be proper in a proper case?

Dr. STACK. Yes, sir.

Mr. BARCHFELD. How many patients were there at that institution when you went there?

Dr. STACK. About 700.

Mr. BARCHFELD. Can you tell this committee what the ratio of help, of attendants, to the number of patients was at that particular time?

Dr. STACK. It was less, I am confident, so far as my memory serves me. For instance, on some wards where they would have four attendants they would only have three then; and where they had there then two attendants they would have three now. Then, aside from that, there was no night nursing service, and there were no special trained nurses.

Mr. BARCHFELD. So that not only has the study and treatment of insanity made progress, but the application of the help has been improved and augmented?

Dr. STACK. I believe so, sir; I am sure of it.

Mr. BARCHFELD. You were under Dr. Godding and Dr. Richardson?

Dr. STACK. Yes, sir; I served under both of them.

Mr. BARCHFELD. How does the management of the institution to-day compare with the management under those two gentlemen?

Dr. STACK. Very favorably, indeed. There has been no retrogression at all in any respect.

Mr. SMYSER. Well, has there been any advancement?

Dr. STACK. Yes, sir.

Mr. SMYSER. It will not do in this day of the world simply to stand still, you know.

Mr. HAY. Doctor, how many of those 63 attendants do day duty and how many of them do night duty?

Dr. STACK. I should say 10 of them do duty at night. About that proportion.

Mr. HAY. Do they have to perform any duty outside of that? Do they do any outside work—do up the lawns or anything of that sort?

Dr. STACK. The day attendants? .

Mr. HAY. The day attendants.

Dr. STACK. The only outside work that I know of is to just police around for an attendant for a couple of hours—an hour or so a day. It is just to police around the building, immediately around the building, you know. The patients will often tear up newspapers and throw things out of the windows, etc.

Mr. HAY. By the word "police" you mean to clean up?

Dr. STACK. Yes; like any housewife would clear up immediately outside of the house. That is the only work the attendants do outside of their specific duty as attendants and nurses.

Mr. HAY. I suppose they have to keep the floors clean and wash the windows?

Dr. STACK. Oh, yes; housekeeping. That is considered the duty of a nurse.

Mr. HAY. In performing those duties they can not give as much attention, can they, to their other duties?

Dr. STACK. No; that is the incidental work and the younger attendants do that, you know. They do the so-called "orderly" work mostly. It does not occupy all of their time at all, because they have plenty of time after that to take the patients out walking or attend to their wants.

Mr. BARCHFELD. That does not interfere with looking after the patients nor from looking after the wants of the patients?

Dr. STACK. No, sir; it is really a part of it.

The CHAIRMAN. Is it the policy of the present method of the treatment of the insane to give them occupation?

Dr. STACK. Yes, sir. I can not imagine anything that is more conducive to the general welfare of patients than to occupy them in some manner. I do not mean working them hard or systematically, in order to get anything out of it, but to give them something to think of.

The CHAIRMAN. And to take their minds off of themselves?

Dr. STACK. Yes.

The CHAIRMAN. And that you do as often as you can and as much as you can?

Dr. STACK. Yes, sir; as much as we can.

The CHAIRMAN. Do you know of any orders having been given at times to attendants to take patients out of the way when the board of visitors were coming so that the board of visitors could not see them?

Dr. STACK. No, sir. I don't believe any order was ever given to that effect; certainly not with my knowledge. But I am sure there would be no object in it. I can not conceive of what the object would be.

The CHAIRMAN. Do the board of visitors see the patients when they come there, to any extent?

Dr. STACK. I suppose they do. I frequently, of course, have gone through the wards with them at times; but the place covers an immense territory and there are a great number of people. The board of visitors, or a committee of the board of visitors, comes out once a month, and the committee will go to different portions or different services at different times; but a long time might elapse without my seeing them.

For instance, under the present administration there is no special method of receiving the board of visitors; that is to say, the physicians are not mustered as they formerly were. It was formerly the practice that all the physicians should be there and go around with the board of visitors. Now, I may be working in the afternoon in the office, and I might see them going through the hall. They may have been to one of the departments, or to my own department, without my knowledge. They are with the superintendent, going around and inspecting the different parts. Then, in addition, occasionally a member of the board of visitors will come out. There is one of the lady members that used to habitually spend a whole day out there every week.

The CHAIRMAN. That was the lady who had some relative there?

Dr. STACK. Yes.

Mr. SMYSER. Doctor, you spoke early in your examination of the

segregation of patients there. Now, are the whites and blacks separated, to begin with?

Dr. STACK. Yes, sir; absolutely.

Mr. SMYSER. And then is the same principle of segregation adopted as to the colored people—that is, as to the whites?

Mr. HAY. You mean as to epileptics, and others?

Mr. SMYSER. Yes; the colored epileptics and homicidals—are they all kept separate?

Dr. STACK. No; I could not say particularly about the colored women just now. About the colored men, their number would be relatively small, and I think there is only an attempt to collect them in one ward; but the capacity of the ward would be greater perhaps than the total number, and so others might be admitted.

Mr. SMYSER. I take it, from this examination, that the spread that you use out there is oleomargarine instead of butter. Is there any reason for that? First, is that true; do you use oleomargarine instead of butter?

Dr. STACK. Yes, we all use oleomargarine.

Mr. SMYSER. All of you?

Dr. STACK. Yes.

Dr. SMYSER. From the superintendent down?

Dr. STACK. Yes, sir. Of course, if any one of the officials, or any one, wants to have butter, he might buy it individually.

Mr. SMYSER. But it would not be furnished over there?

Dr. STACK. No, sir.

Mr. SMYSER. Is there a reason for the use of oleomargarine instead of butter in that institution?

Dr. STACK. There is, sir.

Mr. SMYSER. What is it?

Dr. STACK. I can not give you the exact figures in dollars and cents, because that would be a matter for the superintendent storekeeper to give, but it is a matter of a number of thousands of dollars, and the superintendent of course has to look after his appropriation to meet the other needs.

Mr. SMYSER. So that the idea of economy enters into it first?

Dr. STACK. That is one thing.

Mr. SMYSER. Is there any other reason for it? First, do you regard oleomargarine from a medical and scientific standpoint as healthful?

Dr. STACK. It is perfectly healthful, more so than butter, I have not any doubt.

Mr. SMYSER. Is that a consideration in using oleomargarine?

Dr. STACK. Why, I am certain that it must be, because if it were bad we would not get it anyway. We would not buy it because it was cheap.

Mr. SMYSER. So there are two considerations—economy and better quality, ordinarily, of material?

Dr. STACK. It is unfailingly of good quality and wholesome. Butter is frequently bad. You would frequently get bad invoices of butter. That was the experience when we got butter.

Mr. SMYSER. Did you use to have butter there?

Dr. STACK. Yes, sir.

Mr. SMYSER. And do you find——

Dr. STACK. Not in recent years, we have not had butter there; not for the last five or six years.

Mr. SMYSER. That was before oleomargarine had seized the market?

Dr. STACK. Yes, sir.

Mr. SMYSER. But you actually, in your experience now, find that the use of oleomargarine is wise and beneficial?

Dr. STACK. I hardly could answer that question. I know that it is wholesome. It is uniformly wholesome—that is, we never get rancid oleomargarine, as we do rancid butter at times.

Mr. SMYSER. It has got to pass the test to which butter is not subjected?

Dr. STACK. Yes, and the methods of manufacture. There are in oleomargarine no organic acids and others that are liable to decomposition by heat. Of course if you get the very highest price of creamery butter, where the same scientific methods prevail in making it, you eliminate those chances of early deterioration the same as in the oleomargarine.

Mr. SMYSER. Another thing. Is there any favoritism shown out there?

Dr. STACK. Not that I know of, sir.

Mr. SMYSER. What do you know, if anything, about bringing in new nurses and jumping them over the old employees there in the way of promotion?

Dr. STACK. It has always been against the policy of the hospital to employ nurses from other hospitals except when they have the very highest qualifications and are people of the highest character. There has been no evidence of favoritism that I ever saw.

Mr. SMYSER. You have been there 29 years?

Dr. STACK. Yes, sir.

Mr. SMYSER. Take it for the last five years. How many weeks have you been absent from that institution?

Dr. STACK. I had a vacation either in 1890 or 1891. I have not been away since that time. [Laughter.]

Mr. SMYSER. Do you not really feel kind toward us for inviting you here to testify, so that you could get away from the institution a little while, Doctor?

Dr. STACK. Oh, I occasionally get in town for half a day, you know.

Mr. SMYSER. I want to know about it. I have heard it said that you stay out there all the time, and I want to see about it. I am not reflecting on you at all. I would reflect on you, perhaps, for not coming oftener than you do.

Dr. STACK. I may have been away from the hospital one or two nights in that time, but not more than that, since the early part of 1890.

Mr. SMYSER. Do you stay there as a matter of choice?

Dr. STACK. Yes; as a matter of choice.

Mr. SMYSER. And duty, too, perhaps?

Dr. STACK. Yes.

Mr. HAY. How many times have you acted as superintendent?

Dr. STACK. Only once, regularly. That was in the interregnum——

Mr. HAY. I mean in the absence of the superintendent.

Dr. STACK. Oh, whenever he is away.

Mr. HAY. When is that?

Dr. STACK. For short or long periods.

Mr. HAY. How often is that?

Dr. STACK. Perhaps a dozen or half dozen times, for a day or two, or three days, possibly; on one occasion for a week.

Mr. SMYSER. I suppose your experience has been that in the treatment of the insane you should obtain as much quiet as possible, that being conducive to the best interests of the patients?

Dr. STACK. Yes.

Mr. SMYSER. Do you belong to church?

Dr. STACK. I was reared in the church; yes, sir.

Mr. SMYSER. Of course it would be a little invidious to ask you what church you are associated with, but what I want to get at is this: There has been complaint made that you would not tolerate revivals out there. From your experience would such a thing be conducive to the welfare of the patients, especially with revivals of the emotional sort?

Dr. STACK. No, sir; it would be absolutely detrimental to the patients, I am sure.

Mr. SMYSER. Was it such a revival as I have indicated or religious exercises that our friend Mrs. Goodrich sought to conduct there, and that you prohibited?

Dr. STACK. Yes, sir; of a more highly emotional and personally demonstrative character than you perhaps imagine.

Mr. SMYSER. It beat the old-fashioned Methodist revival, did it?

Dr. STACK. Yes, sir. As a matter of fact, the superintendent has never objected to proper religious exercises. You might go out, in walking, and see them in one of the different buildings or the chapel. They have their own time to do that. It is supposed that those services will be decently and properly conducted, and orderly.

Mr. SMYSER. And in a manner not to excite the patients any more than possible, I take it.

Dr. STACK. Yes, sir.

Mr. SMYSER. In the excluding of our good friend Mrs. Goodrich did you believe then that it was for the welfare of the patients to exclude her?

Dr. STACK. Solely that.

Mr. SMYSER. From holding those exercises?

Dr. STACK. I did, and it was solely for that reason.

Mr. SMYSER. I was about to ask you if you had any other reason at all.

Dr. STACK. None whatever. Mrs. Goodrich knows very well that I was extremely liberal, and she came there and stayed the entire day, and she would stay up to taps at night; until the bell rang at night she was there at different parts of the hospital with her friends, until the matter reached the point where the other patients became involved in this revival.

Mr. SMYSER. And the tendency would be to excite the patients?

Dr. STACK. There were some particularly excitable patients. That is the first thing.

Mr. SMYSER. Do you think you have sufficient buildings out there to accommodate your people?

Dr. STACK. Yes, sir; more than enough since Congress provided the last extension.

Mr. SMYSER. The fact of it is that the restraint by resorting to the strait-jacket or camisole, or whatever you call it, is growing less and less, as you have observed it; is that right?

Dr. STACK. Yes, sir; until it has almost been eliminated.

Mr. SMYSER. From your experience would it be practical to discard those means of restraint entirely?

Dr. STACK. I am certain that it would not. I can illustrate that by describing a case.

Mr. SMYSER. You may do so.

Dr. STACK. There is a very rare form of insanity that many physicians who have the usual practice may go through a lifetime without seeing. It is called acute delirious mania. Formerly it would probably have been called inflammation of the brain in its membranes. In that disease a person is in a state of the very highest and most frantic delirium.

He has absolutely no intelligent conception of his surroundings at all. He goes without sleep almost from the inception of the disease, and lasting about a week—not much more than a week ordinarily—and he would not sleep during that entire time. All the time he will be walking incessantly, dashing himself from side to side, striking and kicking at any persons who come near him. It would be more like the popular conception of a person with hydrophobia. In that case you can do without restraint. The patient eats nothing. This incessant action of course wastes the tissues, and as he takes nothing the tissues become very soft and easily injured. He will not lie in bed, because of the friction, until he becomes so weak that he has to lie in bed. Then he will throw himself from side to side. You could do without restraint in that case, but it would not be humane to do it. It would take several attendants in personal contact to hold him, and his flesh would be bruised, and it is common in cases of this kind to have chafing, abrasions, and bruises when they come into our hands. Such a person you have to restrain from motives of humanity.

Mr. SMYSER. It would take three or four attendants to take care of him, and the use of the restraints would be better. Is that it?

Dr. STACK. Yes, sir. The patient's welfare is looked after in this way. This frantic struggling, of course, is intermittent, and the violence abates for short intervals. Then our nurses take him out of that restraint. There is no inhumanity in the restraint at all, except to keep the man confined in one position. The man is taken out and bathed and powdered from head to foot, and passed up and down between two attendants, and the effort is made to give him food, and the like of that. Then when the violent attack comes on he will begin to fight and struggle and try to break away, and try to reach the wall, or anything else, anything in sight. In such a case as that it is inconceivable how you could do without some restraint, unless you have just a sufficient amount of preponderating brute force there to subdue the man.

That would induce struggling, and I have always felt myself that it is highly improper for any person, under any circumstances, to place his hand upon another man. You feel resentful yourself if a person comes and puts his hand on you, and those people, controlled as they are by many suspicions and delusions—the suspicion that someone is trying to get the better of them, trying to do them harm, and all that—are more resentful than a person in the normal state. You can imagine if some person approached you and tried to coerce you by putting his hands upon you how you would resent it. [Laughter].

Mr. SMYSER. There is one further question, Doctor. Would it tend

to benefit the institution if the superintendent were relieved of many of the duties that are now imposed upon him and some other officer substituted? What I mean is this. I understand that Dr. White, the superintendent there, has to oversee everything.

Dr. STACK. Yes, sir; and I think that the proper course has been pursued in that direction, in the appointment of Dr. Clark the clinical director of the hospital. That relieves the superintendent of the immediate clinical observation of all of the cases. He still sees those new patients every week, and he sees the special cases that each medical officer will want to confer with him about or consult with him about, as the superior medical officer. For instance, if I had a case I would ask him to come in the ward at any time. I would go to him, of course. I would probably confer with Dr. Clark first, but we would confer with the superintendent in a case of importance. Those duties he can perform; but, as I say, the appointment of Dr. Clark to that position relieves him of a great many of the routine medical duties, such as making up medical histories and to supervise all the wards. You see, I am a first assistant, and I only have supervision and responsibility for my own section of the service, while Dr. Clark supervises the whole thing and goes over the whole field. He goes through my service with me, and he goes through another man's service with him.

Mr. SMYER. I had this particularly in mind. As I understand, the superintendent, as I have said, is charged with general supervision of everything. Take the purchase of supplies, and the construction of buildings and repairs. Could the management be benefited if Dr. White was, in a measure, relieved of such duties?

Dr. STACK. No, sir; I am sure the hospital would not be benefited, unless you can conceive of two men who would absolutely get along without friction for many years.

The CHAIRMAN. There is one thing I would like to ask about. I referred to the case of Henry High a little while ago.

Dr. STACK. Yes, sir.

The CHAIRMAN. There was a witness on the stand who testified that Henry High was a man with absolutely no teeth in his head.

Dr. STACK. I believe that was the case.

The CHAIRMAN. And he also said there was no special diet given to him, and that the meat and potatoes that were served to the others were merely set before him, and he was unable to eat it on account of this toothless condition.

Dr. STACK. I will not undertake to say that that may not have been the case for a brief period many years ago, but for the last six years I think he has been in the hospital wards.

The CHAIRMAN. Where special diet was prescribed for him?

Dr. STACK. Special diet—liquid and special diet—and people to see that it was fed to him.

The CHAIRMAN. This same witness testified that men in strait-jackets were tied to trees. Do you know of any such thing having been done in the last five years?

Dr. STACK. No, sir.

Mr. BARCHFELD. Or at any time?

Dr. STACK. Or at any time.

Mr. BARCHFELD. That is the way they treated insane patients five hundred years ago.

The CHAIRMAN. But you do not know of such a thing as that having been done?

Dr. STACK. No, sir. If I ever saw it or knew of it I would have corrected it.

Mr. BARCHFELD. Doctor, what percentage of physically sound patients are employed at some form of labor, if you can tell?

Dr. STACK. Possibly 15 per cent; but that is largely speculation. I could not say.

Mr. BARCHFELD. You have 2,600 patients there, and 15 per cent would be about 400.

Dr. STACK. That would probably be the outside limit.

Mr. BARCHFELD. Is it not a fact that these patients themselves ask for work?

Dr. STACK. Oh, very frequently. It is of very common occurrence.

Mr. BARCHFELD. Do they enjoy their daily walks morning and afternoon?

Dr. STACK. Yes, sir.

Mr. BARCHFELD. There is not the least trouble in the world between the patients and their attendants during those walks? They cheerfully go along with the attendants? They take possibly a 2-mile walk and they sit down and rest and spend an hour or so and then walk back to the institution? The attendants, as a rule, never have any trouble with those patients while they are out exercising them?

Dr. STACK. Not any trouble of any moment without it being reported to the supervisors on their return.

Mr. BARCHFELD. You have services every Sunday afternoon at 3 o'clock at the institution, have you not?

Dr. STACK. Yes, sir, except during the two hot months.

Mr. BARCHFELD. The two months of July and August?

Dr. STACK. Yes, sir.

Mr. SMYSE. That is the way sane people do.

Mr. BARCHFELD. And you alternate those services between the various denominations?

Dr. STACK. Yes, sir; we have five chaplains of different denominations, and each one has services for two months.

Mr. BARCHFELD. One of the services is the Catholic service?

Dr. STACK. Yes, sir.

Mr. BARCHFELD. Another is the Episcopal service?

Dr. STACK. Yes, sir.

Mr. BARCHFELD. The third is the Presbyterian service?

Dr. STACK. Yes, sir.

Mr. BARCHFELD. The fourth is the Methodist?

Dr. STACK. Yes, sir.

Mr. BARCHFELD. And the fifth is the Baptist?

Dr. STACK. Yes, sir.

Mr. BARCHFELD. Are these chaplains paid?

Dr. STACK. Yes, sir; each one gets \$100 a year.

The CHAIRMAN. Doctor, you know considerable about Howard Hall, do you not, where the insane prisoners are confined?

Dr. STACK. Yes, sir; I know considerable about it.

The CHAIRMAN. Were you ever actually stationed at Howard Hall?

Dr. STACK. No, sir.

The CHAIRMAN. How did you obtain your knowledge? By frequent visits there?

Dr. STACK. By very frequent visits there, and I may have had direct charge of it for short periods, to relieve another one of the medical officers. In fact, I am sure I have.

The CHAIRMAN. Where do these criminal insane come from generally; do you know?

Dr. STACK. From all parts of the country.

The CHAIRMAN. Are most of them men who have been in the Army and have been convicted of some crime in the Army?

Dr. STACK. Some of them are military prisoners; but I should say that most of them are civilian prisoners, men convicted of offenses against the Federal law in different States and Territories.

The CHAIRMAN. Oh, offenses against the Federal law.

Dr. STACK. Yes, sir.

The CHAIRMAN. In other words, the Federal insane prisoners would come to you?

Dr. STACK. Yes, sir; or prisoners convicted in Federal courts.

The CHAIRMAN. You have the insane prisoners who come from this District, too, do you not? All of them?

Dr. STACK. Yes, sir.

The CHAIRMAN. Did you ever know of any evidence of unnecessary harshness to the criminal insane?

Dr. STACK. Toward them?

The CHAIRMAN. Toward them.

Dr. STACK. The rules are identical with those as to the other patients. With those men, of course, their natural characteristics, as a rule, are somewhat different from the other men, and the tendency to violent action on their part is greater.

The CHAIRMAN. But the same rules and regulations apply?

Dr. STACK. The same rules and regulations hold good for them as obtain for the others.

Mr. SMYSER. Do you know of a patient over there by the name of Annie L. Drysdale?

Dr. STACK. I know her by sight.

Mr. SMYSER. Is such a patient there?

Dr. STACK. There is a Miss Drysdale.

Mr. SMYSER. How long has she been there, if you know?

Dr. STACK. Five or six years, I should say.

Mr. SMYSER. Do you know what ward she is in?

Dr. STACK. My impression is that she is in the L building. I see her in that neighborhood frequently. She has the privilege of the grounds, and I see her out walking in that neighborhood.

Mr. SMYSER. Are you able to state now what her mental condition is?

Dr. STACK. I do know it, but not from absolute personal contact with her. I know she has many delusions, and writes peculiar letters.

Mr. SMYSER. Is she given to letter writing?

Dr. STACK. Yes, sir. I have seen some of her letters.

TESTIMONY OF DR. A. D. WEAKLEY.

Dr. A. D. WEAKLEY, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. Doctor, are you a physician here in the city of Washington?

Dr. WEAKLEY. No, sir.

The CHAIRMAN. Where are you practicing?

Dr. WEAKLEY. Well, to answer your question directly, I am a dentist.

The CHAIRMAN. Here in the city?

Dr. WEAKLEY. Yes, sir.

The CHAIRMAN. Does your professional work take you out to St. Elizabeth's in the performance of your duties?

Dr. WEAKLEY. Once a week.

The CHAIRMAN. What are your duties there when you get there?

Dr. WEAKLEY. My duties are to look after all the conditions conducive to oral hygiene, except those which necessitate a major operation, which would be done by a surgeon. By major operation I mean that which involves other tissues than the teeth, or the maxillary muscles, or even the maxilla itself.

The CHAIRMAN. You take charge of the teeth of the patients who need attention in that line?

Dr. WEAKLEY. Yes, sir.

The CHAIRMAN. At that hospital?

Dr. WEAKLEY. Yes, sir.

The CHAIRMAN. How are you compensated for that work?

Dr. WEAKLEY. I receive \$8 for each visit, limited to one visit a week. I beg your pardon, though; I do not know that that is strictly limited, but that has been the rule, that I have made one visit a week there—which I have made continuously——

The CHAIRMAN. Go ahead.

Dr. WEAKLEY. Which I have made continuously for the past ten years.

The CHAIRMAN. From the observations you have made during those visits what would you say in regard to the general care and treatment of patients there?

Dr. WEAKLEY. Do you mean comparative, or how?

The CHAIRMAN. Well, no, not exactly comparative. Is the treatment good, in your opinion?

Dr. WEAKLEY. It is, sir. What I may say I wanted to testify to, is, from my small knowledge of the insane, that there has been a great improvement in the care of them in those ten years' experience.

The CHAIRMAN. In what way, particularly?

Dr. WEAKLEY. Well, possibly particularly as to the restraint. When I first visited the hospital ten years ago in certain wards I would find possibly 10 per cent of the patients forcibly restrained by various means. Now I go through those same wards, and I find those patients in very few cases restrained at all, and when they are restrained they are usually restrained in a more humane manner and not by being fastened to a bench, which was one of the favorite restraints when I first visited the hospital in a certain ward which I would mention if you wish to know it.

The CHAIRMAN. I think that is all, Doctor.

The committee (at 12 o'clock m.) took a recess until 2 o'clock p. m.

AFTER RECESS.

The committee reassembled at the expiration of the recess.

TESTIMONY OF DR. WILLIAM P. CARR.

Dr. WILLIAM P. CARR, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Dr. Carr, you are a practicing physician and surgeon in the city of Washington?

Dr. CARR. Yes, sir.

The CHAIRMAN. For how long a time have you practiced your profession here?

Dr. CARR. Eighteen years I have been practicing here.

The CHAIRMAN. Does your professional business take you to St. Elizabeth's asylum frequently?

Dr. CARR. I have been there quite frequently for the last ten years or so. I am consulting surgeon to the hospital at present.

The CHAIRMAN. Do you perform some of the operations out there?

Dr. CARR. Yes, sir.

The CHAIRMAN. Are you a professor in one of the institutions here?

Dr. CARR. Yes, sir; in the George Washington University. I am professor of physiology and clinical surgery.

The CHAIRMAN. How long have you occupied that position?

Dr. CARR. I have been professor of physiology there for about ten years and professor of clinical surgery for three or four years—I forget exactly, sir.

The CHAIRMAN. How frequently do you go out to St. Elizabeth's?

Dr. CARR. Well, I have no regular time for going there, but I go whenever I am needed. I am on duty there three months in the year, and other surgeons take the other months.

The CHAIRMAN. You mean that you hold yourself in readiness during three months to go when you are called upon to perform any operation that may be necessary?

Dr. CARR. Yes, sir.

The CHAIRMAN. How recently have you been there in the last year?

Dr. CARR. I was there about a week ago, sir. I have been there, I suppose, probably twenty times in the three months, as a rule, that I am on duty there.

The CHAIRMAN. Have you made any observations in the asylum relative to the care and treatment of the people there?

Dr. CARR. Yes, sir; I have been all over the place several times just as a matter of interest and curiosity, and at one time I was coroner of the District and had occasion to go there a good many times in that capacity to look it over; but I believe that was before Dr. White came into charge.

The CHAIRMAN. What is your opinion as to the care and treatment of patients in St. Elizabeth's who are received now, and who have been received since Dr. White has been superintendent?

Dr. CARR. It was, I thought, very good, sir. In fact, I was struck with the care and kindness with which the patients were treated there as far as I have seen.

The CHAIRMAN. What has your experience been in regard to the care given to patients on whom you have performed operations?

Dr. CARR. It has been as good as it should be. I do not see how it could be any better.

The CHAIRMAN. What have you to say as to the facilities, so far as convenience for operating there is concerned?

Dr. CARR. Excellent.

The CHAIRMAN. The operating room is a modern room?

Dr. CARR. Yes, sir; the best in the District, I think.

The CHAIRMAN. What, generally, do you know about the character of the medical service in connection with operative cases?

Dr. CARR. I do not know anything that could be improved on.

The CHAIRMAN. You have never had any cause of complaint in regard to anything there?

Dr. CARR. Not at all.

The CHAIRMAN. Either in regard to the medical service, or the nurses who attend at the operations?

Dr. CARR. No, sir. On the other hand, the place has struck me always as being unusually well equipped and well prepared. The attendants are unusually courteous and kind to the patients and to visitors.

The CHAIRMAN. In the observation that you have made of the institution, in having gone through it two or three times, what did you find there as to the condition of affairs, generally?

Dr. CARR. The place always looked neat and clean, and there seemed to be every appliance there for the comfort and safety of the patients. As far as I could see, everyone was attentive to the patients, and it struck me as rather a happy lot of people under the circumstances. Most of them are very cheertul in appearance.

The CHAIRMAN. You receive no compensation, do you, for making these operations?

Dr. CARR. No, sir.

The CHAIRMAN. You are one of a number of gentlemen here in Washington who are appointed as visiting surgeons?

Dr. CARR. Yes, sir.

The CHAIRMAN. And that service is rendered gratuitously?

Dr. CARR. It is.

Mr. SMYER. You are appointed by whom?

Dr. CARR. I really do not know, but I think the board of trustees appointed me. I do not know who it was, though.

The CHAIRMAN. That is a position that men in active surgical practice esteem highly, do they not?

Dr. CARR. Yes, sir. They esteem those places because it gives a certain amount of work and the experience that we could not get otherwise.

The CHAIRMAN. In other words, on account of the large number of patients there there must be experience that a man would not be apt to have in private practice, no matter how large it might be?

Dr. CARR. Yes, sir.

TESTIMONY OF DR. H. J. NICHOLS.

Dr. H. J. NICHOLS, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Dr. Nichols, what is your profession?

Dr. NICHOLS. I am in the Army medical service, attending the Army Medical School in this city.

The CHAIRMAN. You mean as an instructor?

Dr. NICHOLS. No, sir; as undergoing instruction in the examinations for a commission in the regular service.

The CHAIRMAN. In other words, you expect to enter the medical service of the Army?

Dr. NICHOLS. Yes, sir; I am now at the Army Medical School.

The CHAIRMAN. Under whose control is the Army Medical School?

Dr. NICHOLS. It is under the Army medical department—the medical department of the Army.

The CHAIRMAN. Were you ever connected with St. Elizabeth's?

Dr. NICHOLS. Yes, sir; I was there for thirteen months.

The CHAIRMAN. When?

Dr. NICHOLS. From September, 1904, until October 1, 1905.

The CHAIRMAN. What was your position there?

Dr. NICHOLS. I was interne.

The CHAIRMAN. Were you connected with one department there all the time?

Dr. NICHOLS. Yes, sir.

The CHAIRMAN. What portion of the hospital were you in?

Dr. NICHOLS. The detached group of buildings.

The CHAIRMAN. Who was the head physician there?

Dr. NICHOLS. Dr. Hummer.

The CHAIRMAN. And were you the only other physician there?

Dr. NICHOLS. Yes, sir; I was his assistant.

The CHAIRMAN. Where did you graduate, by the way?

Dr. NICHOLS. At the University of Pennsylvania—1904.

The CHAIRMAN. How many patients were there under the control of you two people?

Dr. NICHOLS. There were between 650 and 700.

The CHAIRMAN. What class of patients were they, usually?

Dr. NICHOLS. They were not acute cases. They were either cases of chronic insanity, or convalescent patients.

The CHAIRMAN. Were they all men?

Dr. NICHOLS. All men.

The CHAIRMAN. Were they all white?

Dr. NICHOLS. They were all white.

The CHAIRMAN. Do you know how many attendants there were at that time under you?

Dr. NICHOLS. I think about 55 there.

The CHAIRMAN. How many wards were there?

Dr. NICHOLS. Twenty wards,—that is, counting two wards as one, which is usually done in the calculation. We call it twenty wards in that department.

The CHAIRMAN. You mean that one ward is considered to be subdivided into two departments?

Dr. NICHOLS. Yes; it is a ward in which the patients do not stay during the day at all. They simply sleep there, and there are bedrooms in which they sleep, which go together as one ward; but they are on separate floors, and it might be counted as twenty-one.

The CHAIRMAN. But that is only in one ward, where there are two subdivisions?

Dr. NICHOLS. Yes, sir.

The CHAIRMAN. What do you know relative to the care and treatment of patients there while you were there?

Dr. NICHOLS. Why, I thought it was of the best. I had some little experience in a State hospital in York State.

The CHAIRMAN. Which one?

Dr. NICHOLS. The Binghamton State Hospital; and I thought the comparison was very favorable to the Government institution, as compared with the State institution.

The CHAIRMAN. How did you receive the appointment to the hospital?

Dr. NICHOLS. On the civil service.

The CHAIRMAN. Did you come down from Binghamton at Dr. White's suggestion, or how did you come?

Dr. NICHOLS. No, sir. I was thinking of trying for the Army at that time, and I wanted to spend a year in Washington, and I did it on my own initiative.

The CHAIRMAN. It was a regular civil service examination, was it?

Dr. NICHOLS. A regular civil service examination.

The CHAIRMAN. Do you know of any instances of cruel treatment by attendants of patients while you were there?

Dr. NICHOLS. I do not know of a single instance of cruelty to a patient in our department there. There was not even any number of serious complaints; that is, complaints which we could not immediately rule out as being of a petty nature—simply irritation on the part of a patient, or something like that. We had no actual serious investigation of a case, and there was no occasion for such.

The CHAIRMAN. When complaints were made how did you start to make an investigation?

Dr. NICHOLS. Well, we first considered the character of the man against whom the complaint was made. If the supervisors knew anything against him, or if we knew anything against him—I had not been there very long, and Dr. Hummer knew more about that than I did—then we questioned the patient, and if there were any other patients on the ward who were intelligent we questioned them. We questioned the other attendants, and examined the patient to see if there was any evidence of cruelty; and we simply tried from the evidence that we could get on a case to find out the truth of the matter. As I say, there was not anything of that kind going on—more, I think, than one case, in which I remember I was involved.

The CHAIRMAN. What was that case?

Dr. NICHOLS. That was a case in which a patient complained of pain in the chest. He was an epileptic, and we considered the possibility that he might have injured himself in falling; and a short time after that—he was an old patient, with heart disease—he died, and we found at the examination some evidence of an injury to the chest. We were not able to determine whether that came from a fall or from handling, but there was nothing about the character of the patient which would preclude the liability of its coming from a fall, he being an epileptic. As the attendant on the ward had the best character, we simply let it go at that. We investigated it, but we could not prove anything.

The CHAIRMAN. Was it such an injury as might easily have been caused by a fall?

Dr. NICHOLS. Yes, sir.

The CHAIRMAN. What was the name of the patient? Do you remember?

Dr. NICHOLS. Brown, I believe.

The CHAIRMAN. When was that?

Dr. NICHOLS. I do not recall exactly. It was during the year I was there.

Mr. HAY. Is he the man who was scalded?

Dr. NICHOLS. No, no; that was a different case.

The CHAIRMAN. Do you know anything about the man who was scalded?

Dr. NICHOLS. No, sir; I do not think he was in our department.

The CHAIRMAN. In your opinion might this injury have caused the death of this man?

Dr. NICHOLS. No, sir; I do not think it was of such a nature as to have caused his death, because he had a well-marked lesion, which we were afraid would prove fatal to him. All the time, running along, he was in bed.

The CHAIRMAN. He was in bed all the time?

Dr. NICHOLS. Yes, sir. Well, he was an epileptic, and he was in bed as often as he could be well kept there, being in convulsions; and at the time he was having repeated convulsions.

The CHAIRMAN. Was this occurrence ever spoken of by you to Dr. White?

Dr. NICHOLS. Yes, sir; it was laid before Dr. White.

The CHAIRMAN. And you and Dr. Hummer made an investigation?

Dr. NICHOLS. Yes, sir; we investigated the circumstances as fully as possible.

Mr. HAY. Who performed the autopsy?

Dr. NICHOLS. Dr. Blackburn did the autopsy.

Mr. SMYSER. Was the injury such as that it would have required a great deal of force to have inflicted it, if it had been inflicted by some other person?

Dr. NICHOLS. I do not think so, considering the man's age and the condition of his tissues.

Mr. SMYSER. Would a blow have accomplished it, or a kick?

Dr. NICHOLS. Well, it could have been done. It could have been accomplished by a kick.

Mr. HAY. Might an injury of that sort have hastened the heart disease, and the culmination of the man's disease of the heart?

Dr. NICHOLS. It is rather difficult to say exactly what effect it would have on his heart, but we were of the opinion, as he lived for, I think, two weeks after it, at least, that it had not any immediate effect, at any rate.

Mr. SMYSER. However that violence came about, it did not accelerate death. Is that it?

Dr. NICHOLS. That is my opinion.

The CHAIRMAN. During the time you were there was there any change in the treatment of the patients generally made?

Dr. NICHOLS. I think there was no change, except a little fresh work in the classification of patients while I was there at the ward for suspected tubercular patients that was inaugurated in our department.

The CHAIRMAN. Were you in the habit, as a physician there, of ordering some of the patients to be mechanically restrained from time to time?

Dr. NICHOLS. No, sir.

The CHAIRMAN. You did not use it at all?

Dr. NICHOLS. I did not order any restraint at all. Dr. Hummer, in one or two cases, had patients restrained for a few hours; but I was not in the habit of giving such orders.

The CHAIRMAN. You mean restrained with this camisole?

Dr. NICHOLS. The cuffs. This patient was a suicidal patient.

The CHAIRMAN. As far as you know, was that ever done where it was not absolutely necessary, either for the protection of the patient himself or for others?

Dr. NICHOLS. No, sir; most emphatically not.

The CHAIRMAN. What do you know about the food there?

Dr. NICHOLS. It was a part of our duties to inspect the food, and I frequently visited the dining room and kitchen. I considered that the food was of sufficient quantity and good quality.

The CHAIRMAN. Did it compare favorably with the Binghamton Hospital?

Dr. NICHOLS. Yes, sir, it did; very favorably.

The CHAIRMAN. Both in quantity and quality?

Dr. NICHOLS. Yes, sir.

The CHAIRMAN. How about the service of the food?

Dr. NICHOLS. It was served immediately from the kitchen to the large dining room. I never heard any complaints of it being cold or anything of that kind.

The CHAIRMAN. Did all the patients that were in these detached buildings dine in one common room, except those who were invalids?

Dr. NICHOLS. Yes, sir; 500 of them. There were nearly 208 in the hospital ward.

The CHAIRMAN. Was there a hospital ward connected with it?

Dr. NICHOLS. Yes; six hospital wards.

The CHAIRMAN. How often did you visit these wards yourself?

Dr. NICHOLS. The rule was two rounds a day by a physician, and that was either done by Dr. Hummer and myself going through in the morning, and either Dr. Hummer or I in the afternoon, or else both of us in the afternoon or both in the morning; but there were at least each of us who visited the wards on an average of twice a day. I went in whenever occasion arose.

The CHAIRMAN. Were you always on duty so that you could be called upon in case of necessity?

Dr. NICHOLS. Yes, sir; except after 8 o'clock. Still, I was on duty then, in case of emergency.

The CHAIRMAN. You slept in the institution?

Dr. NICHOLS. Oh, yes, sir.

The CHAIRMAN. What do you know in regard to the scientific work there? Was that improved at all during your stay there?

Dr. NICHOLS. I think there was a decided increase in the interest in the scientific aspect of insanity while I was there, even.

The CHAIRMAN. Have you been there since?

Dr. NICHOLS. Yes, sir; I have visited the asylum frequently this winter. I have been living in town, and I have frequently gone over.

The CHAIRMAN. You find there is a growth in the scientific work?

Dr. NICHOLS. Yes, sir; there is more scientific study being done, which is evidenced by the number of articles which the staff is publishing in the medical journals.

The CHAIRMAN. Apart from the publication of those, what has been

done, if anything, to improve the treatment? What can you mention, particularly?

Dr. NICHOLS. Well, the douche room, for one thing. I did not have anything to do with it. I knew it was inaugurated.

The CHAIRMAN. The douche room?

Dr. NICHOLS. The douche room.

The CHAIRMAN. That you think is an advantage?

Dr. NICHOLS. That is something that is rarely seen in institutions outside of insane hospitals, and it is very rarely seen in insane hospitals in such good condition, in my experience.

The CHAIRMAN. Do you consider that the douche system is the most improved method that has so far been adopted anywhere?

Dr. NICHOLS. Yes, sir; as compared with the method of either mechanical restraint for an excited patient, or restraint by drugs, it is a decided advantage.

The CHAIRMAN. Do the patients generally like that douche?

Dr. NICHOLS. Yes, from what I have heard. I have heard of several cases where they have asked to be allowed to go down there regularly. As I say, I did not have charge of that.

Mr. SMYSER. You are a progressive young man, trying to get into the army, and a graduate of what college?

Dr. NICHOLS. The University of Pennsylvania.

Mr. SMYSER. Do you hold any diploma from any other place?

Dr. NICHOLS. Yes, sir; I graduated at Yale. I took an academic course there, and am also master of arts.

Mr. SMYSER. You are young enough not to be called a back number. Is the douche system of bathing one of the improved methods for institutions of that kind, and so regarded in the profession?

Dr. NICHOLS. It is.

Mr. SMYSER. Do you know anything about the meetings of the medical staff over there?

Dr. NICHOLS. I attended every meeting when I was there.

Mr. SMYSER. How frequently did you meet?

Dr. NICHOLS. Once a week.

Mr. SMYSER. What did you do at your meetings? Did you play 500 or something else?

Dr. NICHOLS. Well, it was a rather serious matter for us younger fellows. Each of us had a journal assigned to us which we were supposed to abstract, I recall, which either bore upon nervous diseases or upon the advance in general medicine, and we were called upon in rotation to give an account of that journal. If we did not have anything to say, that was held against us. Then, special cases which were of interest in different services were either exhibited there, or an account of them was given, or any microscopical studies, or anything like that; and specimens were shown there.

Mr. SMYSER. So that the whole institution was given the benefit of that knowledge throughout the institution?

Dr. NICHOLS. Most decidedly so. The superintendent gave accounts of his visits to different institutions, and the different methods they used there. I thought it was a remarkably fine meeting.

Mr. SMYSER. Have they kept pace there with the improvements in scientific treatment of that class of people, or are they behind the times?

Dr. NICHOLS. No, sir; I think they are fully abreast of the modern treatment, if they are not ahead of it.

Mr. SMYSER. They are not running ahead of it, are they?

Dr. NICHOLS. If they get a little leeway I think they will.

Mr. SMYSER. What do you mean by a little leeway?

Dr. NICHOLS. If they are, you might say, let alone.

Mr. SMYSER. Do you mean if this committee would adjourn?

Dr. NICHOLS. Well, I think it is probably evident what I mean, without putting myself further on record. (Laughter.)

TESTIMONY OF DR. A. H. KIMBALL.

Dr. A. H. KIMBALL, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Dr. Kimball, are you connected with St. Elizabeth's hospital?

Dr. KIMBALL. I am the ophthalmologist of the institution.

The CHAIRMAN. Does that mean that you treat diseases of the eye?

Dr. KIMBALL. I treat the eye, ear, nose, and throat.

The CHAIRMAN. Are you a practicing physician in the city of Washington?

Dr. KIMBALL. I am a practicing physician in the city of Washington.

The CHAIRMAN. How long have you been connected with St. Elizabeth's.

Dr. KIMBALL. Just about two years.

The CHAIRMAN. How often do you visit there?

Dr. KIMBALL. At least once a week. I go regularly once a week, and in case of emergency I go at any time when they send for me.

The CHAIRMAN. Your regular province is the examination of the eyes of the patients that need attention.

Dr. KIMBALL. Yes, sir; the eye, ear, nose, and throat work.

The CHAIRMAN. How did you receive your appointment, Doctor?

Dr. KIMBALL. I received my appointment through Dr. White.

The CHAIRMAN. Where did you graduate?

Dr. KIMBALL. I got my degree in medicine at Johns Hopkins, in Baltimore.

The CHAIRMAN. Do you receive any compensation for the work you do?

Dr. KIMBALL. Yes, sir.

The CHAIRMAN. How are you paid?

Dr. KIMBALL. I am paid so much a visit, calculated at one visit a week. I am only allowed one visit a week.

The CHAIRMAN. If you have to go extra, you do not get any compensation for that?

Dr. KIMBALL. No, sir.

The CHAIRMAN. How much do you receive?

Dr. KIMBALL. I get eight dollars.

The CHAIRMAN. What have you to say, generally, in regard to the operation of that hospital, from your observation?

Dr. KIMBALL. It has always struck me as being very, very favorable over there. I have remarked a great many times to my friends about the kindness of the attendants, as I have noticed them in my trips

through the wards. I mean, even before I knew of this investigation. I go through the wards frequently, and I have an office there. Those patients who are able to come to see me come to the office, and other patients I go to see in the wards. I have never seen anything out of the way in the treatment of patients from the attendants and nurses.

The CHAIRMAN. Are the patients that you visit well cared for between the time you visit them, perhaps, and the time you have to visit them again?

Dr. KIMBALL. Yes, sir.

The CHAIRMAN. Are your instructions in regard to the treatment of the patients by the nurses properly carried out?

Dr. KIMBALL. They always have been; yes, sir.

The CHAIRMAN. Did you ever see any signs or evidences of any unnecessarily harsh treatment of patients there?

Dr. KIMBALL. No. The only thing I have had—I have had one traumatic case.

The CHAIRMAN. What does that mean?

Dr. KIMBALL. That is, it was an injury to the eye that was caused by another patient. One of the colored patients hit another one in the eye with a stone. I was called over there in the evening and saw the case. But that is the only thing I have seen at all.

The CHAIRMAN. You made inquiries about that, as to how it came about?

Dr. KIMBALL. Yes, sir.

The CHAIRMAN. Do you know who he was?

Dr. KIMBALL. I can not remember the name. It was a colored man.

The CHAIRMAN. Was the name Tyler?

Dr. KIMBALL. The name was Warner Grant.

The CHAIRMAN. When was that, Doctor?

Dr. KIMBALL. That was in October of last year.

The CHAIRMAN. How serious was his injury?

Dr. KIMBALL. The eye had to be removed. I was called there by telephone, to come and see the man, and told that another patient had hit him in the eye with a rock.

The CHAIRMAN. With a rock?

Dr. KIMBALL. With a stone. The eye was in such condition that it had to come right out. That was done by another patient. That was in Howard Hall, I think.

The CHAIRMAN. Howard Hall?

Dr. KIMBALL. I think it was one of the criminals.

The CHAIRMAN. Do you know who the other patient was who did this?

Dr. KIMBALL. I do not know. That is the only thing of the kind that has come to my knowledge. It was something that I did not see how it could have been avoided.

The CHAIRMAN. Could this particular injury to the eyes have been caused by a man's fist?

Dr. KIMBALL. No, a fist could not have done it. The eye was cut. In fact, it was mashed up. It must have been done with something like a stone. A fist could not have reached, it could not have caused the injury.

Mr. HAY. Where are you from; what part of the country?

Dr. KIMBALL. I was born here in Washington.

The CHAIRMAN. What can you say, generally, as to the treatment of the nurses and attendants in the relief of these troubles of the eye, throat, nose, and ear?

Dr. KIMBALL. Well, all the instructions that I have given have been carried out over there. They always seem glad to do anything that I direct them to do in the way of treatment.

The CHAIRMAN. As far as you know, have the patients been treated as well as you would have private patients treated, in their care, etc.?

Dr. KIMBALL. Well, of course they could not be treated as well as if they had their own private nurse, but under the circumstances they are treated just as well as they would be anywhere.

The CHAIRMAN. And you have never had to complain that the instructions which you have given were not carried out?

Dr. KIMBALL. I have never had to complain at all.

The CHAIRMAN. You would have no hesitancy about complaining if you had cause to complain, would you?

Dr. KIMBALL. Not in the least.

Mr. HAY. Were you the first physician who was called into the hospital in the capacity you occupy there?

Dr. KIMBALL. No; I think not. I do not know whether there was a regular attendant before or not in that work.

Mr. HAY. You do not know whether that improvement has been inaugurated in the last three years and a half or not, then?

Dr. KIMBALL. I am not certain as to whether there was a regular physician who visited there regularly as I do, but I am under the impression that it was not so, but that there was one who was called in.

Mr. SMYSER. You are a specialist, are you not?

Dr. KIMBALL. Yes, sir.

Mr. HAY. Doctor, it is a fact, is it not, that diseases of the eye, ear, throat, and nose are now treated almost entirely by gentlemen who give to that branch of the profession their entire attention?

Dr. KIMBALL. Yes, sir.

Mr. HAY. You do not do anything else?

Dr. KIMBALL. That is all I do.

Mr. BARCHFELD. How long have you been in the practice of medicine, Doctor?

Dr. KIMBALL. I graduated in 1902, four years ago.

Mr. BARCHFELD. You never were associated or connected with any other hospital or asylum before, were you?

Dr. KIMBALL. With no asylum. I was resident physician at the Baltimore Hospital for the Eye and Ear. Then I did some work in New York.

The CHAIRMAN. Were you employed in connection with a hospital in New York?

Dr. KIMBALL. No; I merely attended the clinics there at the New York Eye and Ear Infirmary, and I was resident physician at the Baltimore Eye and Ear Hospital.

Mr. BARCHFELD. How long have you been the ophthalmologist at this institution?

Dr. KIMBALL. Two years ago this month I was appointed.

Mr. BARCHFELD. You do not know whether they ever had a specialist in your particular line before you went there?

Dr. KIMBALL. I do not know whether they had one as a regular visitor or not. I think they had one that was called in there; but I am not certain as to whether they had him regularly.

Mr. BARCHFELD. In your weekly visits how many patients on an average do you see?

Dr. KIMBALL. I suppose I would average ten or twelve at the present time. When I first went there I saw more, because I wanted to go over the whole institution; but at the present time I see, I suppose, ten or twelve on an average.

Mr. BARCHFELD. You do not examine every patient at the institution unless they are presented to you by an attendant or a nurse?

Dr. KIMBALL. When I go there I have the names given to me of patients in the different departments whom I am requested to see. If those patients are able to come to the office, they come to my office there. Otherwise I go to the wards and see them. These reports are given to me from the various physicians when they have patients for me to see.

Mr. BARCHFELD. It is the policy of progressive medicine, is it not, to specialize?

Dr. KIMBALL. Yes, sir.

Mr. BARCHFELD. And the very fact that this institution has an ophthalmologist is an evidence that it is in the line of progressive institutions?

Dr. KIMBALL. I should say so; yes, sir.

Mr. BARCHFELD. We had a dentist on the stand at noon. I understand they have several other specialists over there who look after a particular line of work. From your knowledge of institutions what would you say as to the management of this institution? Is it progressive?

Dr. KIMBALL. I should say it was decidedly so.

Mr. BARCHFELD. You have never seen any abuse or maltreatment of patients while you have been visiting there?

Dr. KIMBALL. I have never seen anything of the kind, and very frequently I go through the wards unannounced, and I have never seen the least sign of any abuse.

Mr. WALLACE. You could not say that it never had been done though, could you?

Dr. KIMBALL. That would be pretty hard to say.

Mr. SMYSER. Did you ever study abroad?

Dr. KIMBALL. I was in the University of Freiberg, Germany. I studied pathology there.

TESTIMONY OF J. H. LLOYD.

J. H. LLOYD, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Is your name J. H. Lloyd?

Mr. LLOYD. Yes, sir.

The CHAIRMAN. Mr. Lloyd, where do you reside?

Mr. LLOYD. At Anacostia, D. C.

The CHAIRMAN. You came here in obedience to a subpoena sent out to Hot Springs, Ark., did you not?

Mr. LLOYD. I never received such subpoena.

The CHAIRMAN. You received it here; but you came here for this express purpose of testifying here, did you not?

Mr. LLOYD. Yes, sir; I received a subpoena to-day.

The CHAIRMAN. What is your employment now?

Mr. LLOYD. At present I have no employment.

The CHAIRMAN. What have you been?

Mr. LLOYD. For the past year and seven months I have been a special attendant in care of a patient at Hot Springs, Ark.

The CHAIRMAN. What position did you occupy before that?

Mr. LLOYD. I occupied a position as attendant, and afterwards as trained nurse, at the Government Hospital for the Insane, Washington, D. C.

The CHAIRMAN. How long were you there?

Mr. LLOYD. I was there seven years, one month, and five days.

The CHAIRMAN. You left there a year and seven months ago?

Mr. LLOYD. I left there on the 18th day of October, 1904, to take charge of this patient, to take him down to the Hot Springs.

The CHAIRMAN. How long were you an attendant before you became a nurse there?

Mr. LLOYD. I would say about four years.

The CHAIRMAN. And did you take a diploma as a nurse?

Mr. LLOYD. Yes, sir.

The CHAIRMAN. From the training school out there?

Mr. LLOYD. Yes, sir.

The CHAIRMAN. Since Dr. White has been superintendent, what wards in St. Elizabeth's were you connected with?

Mr. LLOYD. With Dawes One and Gray Ash.

The CHAIRMAN. Were you employed as an attendant or as a nurse in Dawes One?

Mr. LLOYD. I was an attendant in Dawes One, and a trained nurse.

The CHAIRMAN. During all the time you were in Gray Ash you were one of the nurses?

Mr. LLOYD. Yes, sir.

The CHAIRMAN. Did you ever see any evidences of cruelty to patients there?

Mr. LLOYD. Not except in self-defense.

The CHAIRMAN. You never saw any evidence of harsh treatment except in self-defense?

Mr. LLOYD. No, sir.

The CHAIRMAN. What do you mean by that, exactly?

Mr. LLOYD. When an attendant is attacked by a patient, he had a right to defend himself if he didn't have proper assistants to be called on.

The CHAIRMAN. You mean that if a patient attacked an attendant, if the attendant had not defended himself the chances were that he would have been seriously hurt?

Mr. LLOYD. Yes.

The CHAIRMAN. You never saw any evidence of cruelty except under those circumstances?

Mr. LLOYD. No, sir.

The CHAIRMAN. And that applies to both the Dawes ward and also to Gray Ash?

Mr. LLOYD. It does, more particularly to Gray Ash, because of the class of patients there.

The CHAIRMAN. Did you ever see any serious row or altercation between a patient and an attendant in Gray Ash?

Mr. LLOYD. Well, I would term it such. I was myself——

The CHAIRMAN. Have you one particular case in mind that you know of?

Mr. LLOYD. Yes.

The CHAIRMAN. Will you tell it, please?

Mr. LLOYD. I was assaulted by a patient——

The CHAIRMAN. Do you know the name of the patient?

Mr. LLOYD. His name is Hale, but I don't remember his initials.

The CHAIRMAN. Go on, tell us about it.

Mr. LLOYD. This patient assaulted me and knocked me down. He hit and kicked at the same time, and I fell with one of my limbs under me—my left limb under me—and it disabled me in such a way that I had to get sick leave.

One of the other attendants was called for, assistance was called for, and one of the attendants on the ward came around and grappled with the patient to protect me from further assault, and he put his arm around the patient's neck—or at least before doing so the patient had got him by the arm with his mouth. To make him release his hold the attendant put his arm around the patient's neck to make him release his hold. As soon as I recovered I sent for the doctor, Dr. Richardson—young Dr. Richardson, the son of A. B. Richardson. He came in and made an examination of the patient. I told him the whole circumstances, and he had the clothes removed from this patient and he examined the patient thoroughly and he found no bruises or anything. There was no violence, except the patient was a little hoarse either from yelling or from being choked, which I explained thoroughly to Dr. Richardson. Dr. Stack came in and I explained the same occurrence to Dr. Stack, and he, Dr. Stack, under such circumstances, said the man had to protect himself.

The CHAIRMAN. The only way the other attendant harshly treated the patient was by putting his arm around him and choking him?

Mr. LLOYD. That is all.

The CHAIRMAN. That was done to get him off?

Mr. LLOYD. To make him release his hold. He had his arm with his mouth.

The CHAIRMAN. Was he biting him?

Mr. LLOYD. He was biting him; yes, sir.

The CHAIRMAN. Do you remember any other instances when you saw anything of that kind done?

Mr. LLOYD. No, I do not.

The CHAIRMAN. Do you know anything about a man by the name of Kinsey who was there?

Mr. LLOYD. Oh, yes; I remember very well about Kinsey.

The CHAIRMAN. What sort of a patient was he?

Mr. LLOYD. He was a very much—well, he was very disturbed and violent.

The CHAIRMAN. Did you ever have any row with him?

Mr. LLOYD. Why, I frequently helped to restrain the patient.

The CHAIRMAN. You mean when he was attacking other patients or attendants?

Mr. LLOYD. When he was attacking other patients and attendants.

The CHAIRMAN. Mr. Kinsey testified here, and this is what he says: "Lloyd twisted my arm until it was seven or eight months after I got

out that I could hardly work at my trade." Is there any truth in that?

Mr. LLOYD. No, sir.

The CHAIRMAN. Did you twist his arm?

Mr. LLOYD. No.

The CHAIRMAN. Or any patient's arm?

Mr. LLOYD. No.

The CHAIRMAN. Did you ever see it done?

Mr. LLOYD. No, unless it was in the struggle, unconsciously. This patient, James A. Kinsey, was assaulted by another patient and had two ribs fractured. It was during the night and I was of course off duty. I was always on day duty, and this was during the night. The patient who inflicted the injury confessed it to Dr. Glasscock and Dr. Stack. He said this patient was yelling all night, and had been so for the past week, and he said he was getting tired of it. He said he knew the attendant dassn't to lay hands on him, but he said he would kill him. He said they couldn't do nothing with him anyhow, he said, he being of unsound mind.

Mr. SMYSER. The incident you have narrated, Mr. Lloyd, of the choking, would be more humane than striking, would it not?

Mr. LLOYD. Than striking the patient?

Mr. SMYSER. In other words, you could control the patient by choking him with less harm to the patient than by striking him?

Mr. LLOYD. I think so.

Mr. SMYSER. And you could reduce him to subjection with less chance of harm to the patient than in any other way?

Mr. LLOYD. Yes, sir; that is my opinion.

The CHAIRMAN. Did you ever keep a diary of the things that took place in the asylum?

Mr. LLOYD. Prior to my leaving the institution I did, for a few weeks; but on leaving the institution I destroyed this paper among other papers. I looked and searched in all my possessions and I cannot find them anywhere—the diary you refer to.

The CHAIRMAN. Do you think there are enough attendants in the hospital?

Mr. LLOYD. No, sir; there is not enough attendants in the hospital. The simple fact is, or at least I will agree with Dr. Clark and Dr. Taylor, that there is enough provided the doors are locked and the gates, and the number of attendants now employed there are kept there day and night and not be allowed out at any time. For instance, the nurses and attendants are allowed every third Sunday. There is 300, giving the figures of Dr. Clark, or there is nine patients to be cared for by one attendant or nurse. So there is 300 attendants and 2,700 patients—I don't know exactly number, but I am giving those figures—

The CHAIRMAN. Yes; that is about right.

Mr. LLOYD. Now, if 100 of the 300 is allowed out every third Sunday, there are not 300 there to care for them. There is twelve months in a year and twenty-four half-months. The attendants are allowed fifteen days' annual leave, which entitles twenty-four of those attendants and nurses to be absent from the hospital. That is 12 per cent. Then, usually, there is some sick on the list. Altogether, I would say, about 160 are there caring at times for them.

Besides, the friends of those loved ones over at the institution come over there and an attendant has to go out to take the patient out to see the friends, out in the reception rooms, and of course this attendant is detailed for that purpose. He stays there until the visitor leaves, in charge of this patient. Well, these patients that are on the ward are being neglected during that time on account of the shortness of attendants over there, and I would say there is not enough attendants.

The CHAIRMAN. In other words, if the attendants are to be given the vacations now prescribed for them by the regulations of the hospital, you think they ought to have more attendants to take the place of those who are off on vacation?

Mr. LLOYD. Yes, sir.

The CHAIRMAN. Kinsey also gave this testimony: "When I went over to the hospital I was treated well enough for two or three days; but I got to understand from Mr. Lloyd that the only way they cured patients over there was by cutting their wind off." Then I asked him: "From whom did you learn that?" and he said: "From Mr. Lloyd, the head man in our ward." Did you ever have any conversation of that kind with Mr. Kinsey?

Mr. LLOYD. I never did. Mr. Kinsey at times was very crazy, very crazy, and was irresponsible for what he said. He didn't know anything at times. At times he was in a perfect delirium, and he didn't know anything; and he thought himself Daniel in the lion's den; and he tore his bed up, and he tied it in bundles so as to figure out in his mind, from his delusion, that it was the lions, and he would say "Ssssh, sssh, don't open the door; sssh, sssh." I says: "What is the matter, Mr. Kinsey?" "Why," he says, "the lion is asleep; the lion is asleep." And then he would take, at other intervals, and get a shoe, or rather a slipper, because we didn't allow them to have shoes with hard heels, and he would put the slippers into a part of the bed ticking and use it to protect himself when you would come in. Four attendants would have to press the door open to get in, for he was stronger than the ordinary.

The CHAIRMAN. Was he in a private room?

Mr. LLOYD. In a private room; yes, sir.

Mr. BARCHFELD. Was he a tailor?

Mr. LLOYD. He was a tailor. He did some work for me, and for some of the other attendants on the ward.

The CHAIRMAN. Kinsey also testified that they, meaning you and Thrift, threw him on the floor and pushed him around the room and tore a finger nail off of him.

Mr. LLOYD. No. Mr. Kinsey, in grabbing the door, trying to get out of it, he got his finger caught in the door.

The CHAIRMAN. That is the way he did it, in trying to yank the door open?

Mr. LLOYD. We were in with him, and when we tried to close the door he made an attempt to get by us, and he grabbed the door with his fingers, and got it fixed in the door.

Mr. SMYER. Was he not a quiet sweet-tempered patient?

Mr. LLOYD. At intervals, but those intervals were of very short duration.

Mr. BARCHFELD. And far between.

Mr. LLOYD. When he came there he had a habit of going around and placing his hand over the tops of the patients, not touching the

patients, but saying something, that he was the Zodiac, you know. You know, he went insane from "How old is Ann"—the puzzle that was got out in the Times, "How old is Ann?" [Laughter.] He solved the problem, but he didn't get the prize, and he lost his balance. There was \$100 offered by the Times to anyone who would solve the puzzle "How old was Ann" and when he was admitted in the institution he would go all over the tops of the heads of the patients, but not touching them, in a jolly jovial way, you know, and the next instant he was a raving maniac, whooping and hollering and yelling, declaring himself Daniel in the lion's den.

Mr. SMYSER. Is there any foundation on the part of Mr. Kinsey for his accusations against you?

Mr. LLOYD. No, sir.

Mr. SMYSER. He was at times violent?

Mr. LLOYD. Yes, sir.

Mr. SMYSER. And you had to restrain him?

Mr. LLOYD. We had to restrain him.

Mr. SMYSER. In doing that did you treat him as considerately as you could?

Mr. LLOYD. I certainly did. I did not use any more force than was absolutely necessary, and the doctors there are willing to testify because they made frequent rounds in the wards—Dr. Stack and Dr. Glasscock, especially Dr. Glasscock was in the ward four times a day, and if there is anything very important, or that I thought the doctor should know immediately I would either telephone or send after him; and he responded very promptly and the matter was adjusted. So Dr. Glasscock is able to say whether he had been illtreated or not, or Dr. Stack either, whether I have illused him by bruising or fracturing bones, or anything of that kind.

Mr. HAY. Did you always have an order of the physician before you used restraint?

Mr. LLOYD. Oh, yes, yes. I never restrained a patient without first getting an order from the doctor; oh, no, certainly not. That is a rule of the institution.

The CHAIRMAN. Did you know a man by the name of Hogan? Was he on Gray Ash ward as an attendant when you were there?

Mr. LLOYD. He taken charge on Gray Ash ward, I think, the day I left, or the day after.

The CHAIRMAN. Did you ever know a patient there by the name of Daddysman?

Mr. HAY. Do you know an attendant there by the name of Mr. Thornton O. Pyles?

Mr. LLOYD. Yes, sir.

Mr. HAY. Was he under you?

Mr. LLOYD. He was in charge of the ward adjoining mine.

Mr. HAY. Do you know anything about a patient named Thornley?

Mr. LLOYD. Yes.

Mr. HAY. What was his case? Was he violent?

Mr. LLOYD. When he was first admitted to the institution he was, I would say, very much disturbed, and he was an incessant talker. He talked and talked; he would stand right up to you and talk a blue streak, and if you were to give him any instructions to sit down, for instance, or anything of that kind, he would jump right into you without any provocation whatever. He was a small, little fellow, and of

course one man could ordinarily hold him, but he was pretty wiry, and he would scuffle with the attendants, and oftentimes tear the clothes of the attendants.

Mr. HAY. Mr. Pyles testified that it was not necessary to restrain him, but that he was placed in strait-jackets very often. What do you know about that?

Mr. LLOYD. I believe when he was first admitted he was.

Mr. HAY. Did you have to do it?

Mr. LLOYD. Not unless it was the doctor's orders.

Mr. HAY. I understand; but I mean did the doctor order it?

Mr. LLOYD. I think he was in a strait-jacket; yes.

Mr. HAY. He also testified about patients being tied to trees out here. What do you know about that?

Mr. LLOYD. I never saw patients tied to trees since I have been here.

Mr. SMYSER. Did you ever see them tied to benches?

Mr. LLOYD. I have seen them use those cuff straps that goes around the waist and have cuffs that is brought around, and the back of the settee, you remember, has slats straight up and down, and this strap is brought around there to keep the patient from getting at other patients. With one case, a man named P. J. Kelly, he had a habit of biting the buttons of the patients that sat alongside of him, he would bite the brass buttons off of the soldier's coat, you know, and I have known him to swallow these buttons—how many, I couldn't say; but I have known him to swallow them. Besides, this patient was very much disturbed.

The CHAIRMAN. He must have been a human ostrich, I guess.

Mr. LLOYD. He was something fierce. You couldn't do anything with him. If you went close to him he would bite you, and it was necessary to restrain this patient out of protection of the other patients, more especially that than of himself. He never tried to hurt himself, but he always tried to hurt somebody else. Without exaggerating, I think he has tore up about 500 blankets, and I have seen him chewing continually on blankets, and from the fecal matter that passed I could see very readily that he not only eat brass buttons but blankets. [Laughter.] I am simply telling you just as it is.

Mr. SMYSER. Certainly. Tell it.

The CHAIRMAN. What was that man's name?

Mr. LLOYD. P. J. Kelly. This patient was first at Howard Hall. He was so violent and disturbed that he was at Howard Hall. He was restrained in a strait-jacket and a bed saddle and muffs and straps. All these restraints were applied on this patient for about eight months, and finally he got down, he was emaciated, and he was brought over to Dawes One ward and turned over to me.

The doctor turned him over to me, and he said, "Lloyd, do the best you can with him." He said: He won't last much longer; we can not get him to eat." The first meal I taken to the patient, the first spoonful of food that I put to his lips, he got it in his mouth and he spit it in my face. I set the tray down and looked at him. I said: "There is nothing the matter with you, Pat, except that you have got the devil in you." I said: "Wake up, wake up!" I said: "For instance, suppose I was in your position, laying there strapped hand and foot." I says: "Suppose you had brought me food, and I had taken a spoonful of food and deliberately spit it in your face; what

would you do to me; what would you think of doing to me?" He said; "Lloyd," he says, "take these straps off." He says: "If you do, I will promise you upon my word and honor as a man I will never give you any more trouble." I says: "All right, Pat."

Now, I was not supposed to take those restraints off without an order of the doctor, but from my experience and tact, of looking after the insane for a number of years, just on the impulse of the moment I thought to myself, "Now," I says, "if I wait fifteen minutes, or even five minutes, or leave even the room to go after a physician, or to summon one, I will lose the opportunity, maybe the best one of his life. I said: "All right, Pat." I says: "I will remove the restraint," and I did. So he sat there and he talked pitifully. He says: "What are they trying to do to me anyhow? Are they trying to kill me?" I says, "No, Pat; you have caused all this yourself." I says: "When your brother saw you in Howard Hall, what did you do?" I says: "You assaulted him." I says: "You treated him very roughly, besides using some of the most violent language I ever heard from any man's lips." He says: "Was he there? Did he call?" I said: "Don't you remember it?" He says: "No." So I went over the patient.

He had bedsores as large as the palm of your hand. His elbows—there was an ulcer there that you could see the bone work. There was nothing except a little tissue to cover it. As soon as he came to himself, I said: "Pat, there is something else the matter; there is some trouble that you have not been able to find out. What is the trouble?" I said: "I will assist you to remove that shirt." I took his shirt off, and I went over him thoroughly. Of course, I had been treating those abscesses and sores that had formed. One of his limbs was very much swollen, and I said: "There must be some cause for this," and in the groin I found an abnormal rising, about like the ball of your thumb would be, except there was no discoloration, no redness, you know. When Dr. Richardson came in, I said: "Doctor," I says, "I wish you would look at this. Pat has promised to be on his good behavior, and I want to do all I can for him." He said: "All right." So, when the doctor came close to him he snapped at him like a dog. I said, "Pat, what are you doing?" So Pat, he said: "That is all right, Lloyd; I will do anything in my power for you, but I haven't got any use for the rest of them. Anything you say goes. You have my word." So I said: "All right, Pat." He was so close to Dr. Richardson that he jumped out of his way. The Superintendent ordered this abnormal rising opened. You might think I am exaggerating it, but I was there, and I was the one who looked after the wound after the incision was made. It was operated on, and one gallon of corruption, of serous fluid, mixed with broken down tissue, was taken out. If you would hold the limb up like that [indicating] it would pour out just like an artery, when it is severed. It would spout out. The next day I got out half a gallon, and it ran down until I only got a few drops, and in three month's time he had his clothes on. His arm had been bandaged for the length of six months, and it never would heal, and consequently his arm was stiff.

I went to work after it granulated up, after it healed up. They had to burn it down with nitrate of silver to the ordinary surface, and he couldn't bend it. He wrote a letter to his brother, with the motion of his wrist. He couldn't bend the elbow anyway. I massaged that until he could bend it, and on the 4th of May, 1903, he was discharged,

if I remember correctly, from the institution, as being perfectly of sound mind and physically strong. He rode a bicycle around the place. He had parole, and finally he got the privilege to go over in town. He was discharged from there, and he lives in New Jersey, or he did at that time. At least, his brother did, and he made his home with his brother after he left the institution.

Mr. HAY. This happened before Dr. White went there?

Mr. LLOYD. This happened before Dr. White's time; but I want to say that these restraints were used in Dr. Godding's and Dr. Richardson's time. I was there under three administrations, but Dr. White was the first superintendent that ever gave orders to remove the restraints of all kinds from the patients. At least, I got that order from him through a supervisor, and it was there carried into execution by the fact of my collecting up all the strait-jackets, all the muzz, all the straps, and bed saddles—the straps, muzz, and strait-jackets—that was all the restraint that was used on Gray Ash Ward at the time the order was issued, and I taken them out to the marking room, and since then they were placed away into a cupboard, on Dawes Third in the entrance way, or the stairway leading up to the head, in a closet.

Mr. HAY. Mr. Pyles has testified that you kept a diary and he has inferred or stated—I can not find exactly the statement—that that diary contains some evidences of cruelty or something of that sort. What have you to say about that?

Mr. LLOYD. That diary is as regards food.

Mr. HAY. It was in regard to food?

Mr. LLOYD. That was all I had to note at the time. I meant to keep a diary of ill treatment, if there was any, you understand, for I had brought the matter up before the Hospital Attendants' Protective Union. I brought it up at the Union, and it was adopted. I said: "If these attendants ill use patients, you want to keep a diary of it." I says: "We want to have the date, and the attendant, and the seriousness of it." And I says: "In regard to the food, you must have data, if you are going to testify at any time hereafter." I said: "You will go up there, and you won't know what to say, and you won't know what to do; you can't furnish the facts, and the result is you don't get a proper hearing."

Mr. HAY. Did that diary of yours contain any instances of cruelty?

Mr. LLOYD. No.

Mr. HAY. It did not?

Mr. LLOYD. No.

Mr. HAY. What have you to say about the food?

Mr. LLOYD. Well, the food was not as good as it should be. It was not as good as it was when Dr. Richardson first taken charge. The quality of the food was lessened in Dr. Richardson's time. Toward the last portion of his administration the quality was lessened.

The CHAIRMAN. Do you say the quality or the quantity?

Mr. LLOYD. The quantity was lessened. The quality was not as good, in other words, toward the last of Dr. Richardson's administration as it was in the beginning. If you will allow me, I want to explain this thoroughly.

I asked Dr. Richardson after he was there two or three month—I said, "Doctor, there is four attendants on this ward and 49 patients in bed. I have 69 patients in the ward. We are on our feet from

twelve to fourteen hours a day. You understand, as being a physician, you know the amount of work and worry we have in caring for the unfortunate insane. Do you think a dish of brown beans, or a cup of coffee, and bread and butter, and a dish of stewed apples, is enough for a man who has to be on his feet looking after these insane people for these number of hours?" He said, "Is that what you get?" I says, "There is three other attendants," I says, "to corroborate what I say, and there are some intelligent patients, or at least patients that are convalescing sufficiently to tell you exactly what I say is so." I says, "We get the same the patients get."

He turned to Dr. Stack, and he says nothing to Dr. Stack, and he says, "I have already authorized Dr. Stack to fix up a menu card, and I will change it. I contemplated it before you asked for it, but I will see that it goes into effect." And he says, "Doctor, I want you to hurry that up." The next day I got ham and eggs, French fried potatoes, coffee, and James F. Oyster's creamery butter. It was elegant—good enough for anybody. That lasted for awhile, but I understand through not having a sufficient amount of appropriation they had to make some reduction in the expenses, and the food was not as good. Besides, they installed some appliance down in the bakery, in regard to electricity in the mixing of dough, and I carried a biscuit, or at least a roll, in my pocket to show the doctor.

Mr. HAY. What doctor?

Mr. LLOYD. Dr. Richardson. I said: "It is hard." The oleomargarine was also substituted. At least, creamery butter was substituted by using oleomargarine in Dr. Richardson's time, and when Dr. White came into control of affairs it was never taken off. There was considerable complaint about it. I never complained to the Doctor, but I heard the complaint about it. I don't know whether the Doctor was informed of it, but I am one of those people that if I have anything to state I go to the head, the authorities. There was corned beef served there that was tainted, or, in other words, rotten. It was so offensive that I couldn't sit at the table where it was, and I wrote out a statement for Dr. Stack, and the reason I did that was because I didn't think doctor had time to give it his attention, as he was on inspection, and had all the patients, and didn't want them to be deprived of his presence and services.

He says: "Lloyd," and he sat down on the seat alongside of me—so he read the statement I had given him—and he says: "Mr. Lloyd, that makes three or four"—Dr. Toner was present—"three or four consignments of that kind that I have sent back to them," and he says: "It will be the last. I will attend to that matter at once." The potatoes that there has been so much talk about, with the jackets on them, or that had the peel on them, they sometimes are not properly cooked. They are soggy, they are left in the water too long.

Mr. HAY. How was the food just after the new superintendent took charge?

Mr. LLOYD. There has been no improvement in the food stuff since Dr. White has taken charge.

Mr. HAY. Does that pertain to all of the hospitals or just the ward with which you were connected?

Mr. LLOYD. That pertains to the ward I am acquainted with. I have visited other wards.

Mr. HAY. How many other wards?

Mr. LLOYD. I have visited all the male patients' wards of the Dawes Building, the Garfield Building, and the Ash Building.

Mr. HAY. Did you taste the food in all those wards?

Mr. LLOYD. Oh, no; I didn't taste the food in all those wards.

Mr. HAY. Did you inspect the food?

Mr. LLOYD. I inspected it; yes.

The CHAIRMAN. You say the diary you speak of you destroyed?

Mr. LLOYD. Yes, sir.

The CHAIRMAN. Were there some notes besides that that you had taken on separate pieces of paper?

Mr. LLOYD. My wife sent me down clippings from the papers, and I wrote something while I was down in—

The CHAIRMAN. I mean memoranda you took while you were there.

Mr. LLOYD. No; I couldn't find anything at all bearing upon the case.

The CHAIRMAN. Were there any papers at all which you turned over to officials of the hospital?

Mr. LLOYD. I have got some of those with me. That has been also given to Members of Congress. It is grievances, if you gentlemen would like to look at it.

The CHAIRMAN. When was it given to Members of Congress?

Mr. LLOYD. This was given during Dr. White's administration, in 1904, the early part of 1904, in the spring.

Mr. HAY. To what Members of Congress?

Mr. LLOYD. To Mr. Bankhead from Alabama, and Senator Gallinger, and Senator Daniel from Virginia, and Representative Rixey. He was furnished with a copy of the bill and grievances—and Representative Mudd.

The CHAIRMAN. A bill that was introduced in Congress?

Mr. LLOYD. An amendment. I laid it before Dr. White, and he objected to certain sections and clauses in the original bill, and I substituted that. [Indicating.] That is, I had an amendment to the bill where it was asking for an appropriation of \$10—

The CHAIRMAN. It was in relation to a desire that you had to increase the pay of the attendants?

Mr. LLOYD. Yes.

The CHAIRMAN. And this statement that Mr. Hay has is in regard to the number of hours the attendants had to work?

Mr. LLOYD. Yes; and the work.

The CHAIRMAN. Let those papers go into the record.

The papers referred to are as follows:

[H. R. 14416, Fifty-eighth Congress, second session. In the Senate of the United States. April 2, 1904. Referred to the Committee on the District of Columbia and ordered to be printed.]

Amendment intended to be proposed by Mr. Pettus to the bill (H. R. 14416) making appropriations for sundry civil expenses of the Government for the fiscal year ending June thirtieth, nineteen hundred and five, and for other purposes, viz: Insert the following:

That the attendants and nurses employed at the Government Hospital for the Insane shall receive an increase of ten dollars per month in addition to their present salary, except attendants and nurses on probation, who shall receive an increase of four dollars per month, to take effect the first of July next, and the sum of thirty-five thousand dollars is hereby appropriated for said purpose.

By your request we hereby make the following statement in writing pertaining to our work, duties, hours on duty, and off, etc.

The attendants and nurses employed at the Government Hospital for the Insane are

required to labor thirteen hours of any one calendar day --on an average of twelve hours one evening and fourteen the next.

When not so engaged, the attendants and nurses are compelled to be in their respective wards unless excused as follows:

Unmarried attendants and nurses are excused from 6 p. m. until 10 p. m. every other evening--4 hours out of 48. In addition to this, they are excused one night each week from 6 p. m. until 12 p. m. This gives them 6 hours out of 48.

The attendants and nurses that are married and have a family living away from the hospital are excused from 6 p. m. until 6 a. m. every other night, making 12 hours out of 48.

In addition to this, they are allowed in any one calendar year the following time:

	Days.
Annual leave	15
One-half day each week	26
Every third Sunday	17
National holidays	2
Sick leave	30

They receive their sick leave in allotments of $2\frac{1}{2}$ days per month, provided they are sick in bed.

When not excused as above, the attendants and nurses are required to be in their respective wards nine (9) hours during the night for any emergency call, such as restraining some violent patient, to look for some patient that is trying or has escaped, to bathe a number of patients that may arrive during the night, and in case of fire, etc.

The attendants and nurses have thirteen hours of toil of the most tedious kind. The many kinds of work they have to perform are too numerous to mention in detail. But to care for 30 or 40 irresponsible people who are insane, and only two to four attendants or nurses to care for said number of patients, it would be supposed that they spend a very few idle moments in their thirteen-hour day.

After that long day they are required to retire for the night in their rooms on the same ward with the insane patients, subject to an emergency call, and also listen to the moaning, muttering, shrieks, and a tattoo beat on the doors by the unfortunate patients who are placed in their care. The night's rest of the attendants and nurses is frequently disturbed, and as a result their mental and physical strength is endangered.

The attendants and nurses are required to purchase and wear uniforms while on duty and said uniforms are furnished out of their monthly earnings. These uniforms cost from \$3 to \$15 and are often pulled and torn to pieces by violent patients.

Also the attendants and nurses are required to pay the sum of \$5 for patients who escape from them while out walking.

So it can readily be seen that we have a very little time off duty and a very little money. The scale of wages range anywhere from \$14 to \$37.50 per month, with board.

Therefore, owing to the increased cost of living and the long hours, and other hardships that we have to contend with, we respectfully ask you honorable gentlemen for an increase of \$10 per month.

MR. HAY. Mr. Lloyd, what have you to say about the general care and treatment of the patients out there at the asylum.

MR. LLOYD. It is good. I wish to say it is good in this way, that if I should see that I could not earn a livelihood any longer I would feel like playing crazy and going there as a patient, for I would rather be there as a patient than as an attendant. [Laughter.]

MR. HAY. Then the only complaint you have to make about the institution at all is that the food is not just what you think it ought to be?

MR. LLOYD. What I say is——

MR. HAY. I mean as to the patients. I am not talking about the grievances of the attendants now.

MR. LLOYD. Yes, the food—I was away on a vacation at Hot Springs last month, and I walked through Dawes Second, and there was a person there by the name of Connolly. He was complaining very bitterly about the food. I says: "What is the matter with it?" He says: "It is rotten." He exaggerated no doubt about that. I says: "I would like to hear all about it." He says: "I will tell you." He says: "There is two rolls served to each patient," but he said:

"Some of them, like hogs, get more than their share, and that only leaves me one," and he says: "Sometimes I don't get any."

Mr. HAY. That is the fault of those who have the care of the patients, is it not? Ought they not to have somebody there to see that the patients do not do that?

Mr. LLOYD. I do not know whose fault it was, but when I was on Gray Ash I went down to the kitchen and got more for them, and I always told them, if they didn't have enough, to say so, and I would go and get it.

Mr. HAY. So that the patients under your control got sufficient food?

Mr. LLOYD. They got sufficient food.

Mr. HAY. And that could have been done in any other ward, I suppose?

Mr. LLOYD. I had no trouble in getting it. I saw Miss Mary O'Leary, who was in charge of the kitchen, and I would ask her for it and get it. I never was turned down in my life, and I have been there on several occasions, because I was determined to see that the patients were treated on the square that I had anything to do with. I had no hesitancy in getting more food if I wanted it—meat, vegetables, or anything that ran short. I think a little better variety of food would help considerably at the institution. I think this Government is able to supply them with a little more variety.

The CHAIRMAN. Did you ever know of any orders being given by the supervisors to take the patients out of the way on the Board of Visitors' day?

Mr. LLOYD. It has been the custom to take the patients out morning and evening, you understand, regularly.

Mr. HAY. Every day?

Mr. LLOYD. I had no orders to take those patients out of my ward particularly because the visitors were coming; because I have had the visitors in there to see them all on the ward on several occasions.

The CHAIRMAN. You did not act any differently on the days when the Board of Visitors were coming than on other days?

Mr. LLOYD. Only we expected to have everything in sanitary condition. We did some extra work in cleaning up, to have things in proper shape.

The CHAIRMAN. You expected to have things in sanitary condition all the time, did you not?

Mr. LLOYD. All the time, yes, sir; but this was a holiday, as it were, and like most of the people we would make special preparations for the reception, and it naturally gave extra trouble.

Mr. SMYSER. You would dust off the parlor when you expected company.

Mr. LLOYD. Most assuredly; and especially the seats.

Mr. HAY. I understand you to say something about a union.

Mr. LLOYD. Yes, sir.

Mr. HAY. Have the attendants there a labor organization?

Mr. LLOYD. Yes; affiliated with the American Federation of Labor. I was chairman of the legislative committee of that body.

Mr. HAY. Let me ask you this: If attendants are discharged there, do they ever get square into the cause of it?

Mr. LLOYD. Yes. That is, they did in certain cases, you know.

Mr. HAY. What did they find out? Did they find that they were properly discharged?

Mr. LLOYD. In some instances they did, and in some they did not. There is one particular case that I don't think they investigated, because, myself, I had some trouble for laying the matter before the Superintendent before carrying it further.

I was a civil-service man, appointed through the Civil Service Commission, and I took my examination before the Board of Examiners at Eighth and E streets, and I felt it my duty out of respect to Dr. White, and also complying with the civil-service law, that it was proper to lay it before the executive of the department before going further, and for that reason the union found much fault with me, and at one time they threatened to turn me out of Haynes Hall, in Anacostia. It was not on this investigation of finding out whether attendants were improperly discharged or not. As a matter of fact, I can not give very much data or any information in regard to it.

Mr. HAY. Do I understand that it is one of the rules of your organization that you shall keep, each member of the organization should keep track of any cruelty, if any cruelty is practiced by any of those attendants, and that it shall be reported to the Superintendent?

Mr. LLOYD. I offered that, you understand.

Mr. HAY. As a resolution?

Mr. LLOYD. As a resolution; but it was not on the minutes. It didn't go on the minutes; but the subject came up, and I satisfied them that it was the proper thing; but they didn't come to that question.

Mr. HAY. What induced you to offer such a resolution?

Mr. LLOYD. Oh, I was on the legislative committee, and was looking for the betterment of the attendants and nurses getting increased pay and shorter hours.

Mr. HAY. I understand; but had there been any practices or cruelty which you knew of and which induced you to offer the resolution of that character?

Mr. LLOYD. Well, no; not particularly; but then, of course, I would want to make it as strong as possible, and have something to bear out our statements that we made. In other words, that we would have the technicality along with the substance of it.

The CHAIRMAN. Your main cause for complaint was the food, and the fact that the attendants had to work too hard, was it not?

Mr. LLOYD. Yes, sir; and that we didn't get pay enough.

The CHAIRMAN. From your observation there, while you were employed in the hospital, did you think the doctors treated the patients as well as they could have been treated?

Mr. LLOYD. They couldn't treat them any better. They are the most humane doctors I ever saw or ever came in contact with. All I would have to do was to telephone, and inside of two minutes, you know—on Gray Ash ward I would send a man because it was next to the center; but it was usual to get him in two to three minutes' time. If it was anything urgent, they would come immediately, and they never had any trouble in getting a doctor when they wanted one. Sometimes I would get a doctor when I didn't want one. (Laughter.)

Mr. BARCHFELD. Are you still a member of the Hospital Attendants' Protective Union?

Mr. LLOYD. No, sir; I withdrew.

Mr. BARCHFELD. You stated to the committee that it was a part of the function of this organization to have up the grievances of discharged employees.

Mr. LLOYD. Yes, sir.

Mr. BARCHFELD. What was your mode of procedure?

Mr. LLOYD. It was to investigate the charges.

Mr. BARCHFELD. And if you found the charges unfounded, what was your course?

Mr. LLOYD. The proper course was to lay the matter before the Superintendent, and if the matter was not adjusted there it was the intention and the duty of the association to lay it before our affiliated body—that is, the American Federation of Labor, you understand—and they in turn was to bring it back to the Superintendent and see if the matter could not be adjusted; and if it was of a very grave nature of course we would have to appeal then to Congress or somewhere or the Secretary of the Interior or the board of visitors.

Mr. BARCHFELD. Did you ever have occasion to resort to such procedure?

Mr. LLOYD. Why, yes. They had occasion to; but I don't think they went into it as they should; and, as a matter of fact, the parties lost by it, you know. In other words, there was a grievance on the part of a person who was an employee. We didn't think he was fairly treated by the association—the Hospital Attendants' Protective Association.

Mr. BARCHFELD. This organization is still in existence?

Mr. LLOYD. It was at the time of my leaving the hospital in October, 1904.

Mr. BARCHFELD. Did every attendant and nurse belong to the organization?

Mr. LLOYD. No, not all; but the majority of them did.

Mr. BARCHFELD. Who, if you know, is the head of the organization at this time?

Mr. LLOYD. At this time, I don't know, as on leaving the hospital I resigned from the association.

Mr. BARCHFELD. Who was president when you resigned?

Mr. LLOYD. Swann.

Mr. BARCHFELD. Is that a male or a female?

Mr. LLOYD. A male.

Mr. BARCHFELD. Did you have ladies in your organization?

Mr. LLOYD. Yes, sir.

Mr. BARCHFELD. How often did you meet?

Mr. LLOYD. When there was any important business it would be once a week. When there was not, it would be once in two weeks. Then when there was not anything extraordinary, sometimes once a month.

Mr. WALLACE. Did Dr. White treat patients fairly and cordially like Dr. Richardson?

Mr. LLOYD. No. The difference between him and Dr. Richardson is that Dr. Richardson would go up and shake hands with a patient, and stop and talk; and of course he wore a smile that was pleasing to most anybody; and naturally he won the patients and employees alike towards him. Dr. White, which you refer to, he doesn't do that. That is what those patients like is to shake hands. From a

sanitary point of view I do not know but what Dr. White is right, because their hands are not always clean. I will come right down to straight English.

Mr. WALLACE. But a doctor is accustomed to putting his hands into unclean things, is he not?

Mr. LLOYD. Yes; but it is not always convenient for a doctor to wash his hands like he would like to, to shake hands with a patient. Sometimes the patient is untidy. There are some very untidy patients at the hospital. Some of them are very, very untidy. That is, some of the patients will take all their clothes off and take their faces and smear themselves from the top of their head to the sole of their feet, so that you can't tell hardly whether they are human or what they are. Of course, I don't blame the doctor for not shaking hands with a patient of that kind.

Mr. WALLACE. But they are not all of that kind?

Mr. LLOYD. No; they are not all of that class in the institution.

Mr. WALLACE. Did the doctors like to shake hands with a select class?

Mr. LLOYD. Oh, yes; when the doctor becomes acquainted with a patient and knows his habits, he would shake hands.

Mr. WALLACE. Did he go out over the wards like Dr. Richardson?

Mr. LLOYD. In my ward he would inspect our room and the ward itself. I couldn't say he neglected business in that way.

Mr. WALLACE. In a general way you did not see as much of Dr. White as of Dr. Richardson?

Mr. LLOYD. No; I couldn't say I did, because soon after Dr. White taken charge of the institution our buildings were erected, and his time was very much taken up looking after things and getting these buildings ready. But I had an assistant superintendent there. I had one of the assistant doctors there. The assistant superintendent would be in there every morning and three or four times a day. As I said a while ago, I would see a doctor sometimes too often. That is, they would come when they were not sent for.

Mr. WALLACE. There is a way for a doctor to be cordial without touching a patient?

Mr. LLOYD. Oh, yes. I never saw the doctor assault any patient there. I never saw one of them assault a patient. I have seen a patient assault Dr. White, and I have seen them assault Dr. Stack, when I was in the room.

Mr. WALLACE. I am not talking about assaulting, but I am talking about the different characters of the two men in the same position toward their patients.

Mr. LLOYD. Oh, as I have already stated, you understand, I did not think that Dr. White was as congenial toward the patients as Dr. Richardson.

TESTIMONY OF C. L. SKINNER.

C. L. SKINNER, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Where do you reside?

Mr. SKINNER. At the Government Hospital for the Insane.

The CHAIRMAN. Are you an attendant there now?

Mr. SKINNER. Yes, sir.

The CHAIRMAN. How long have you been there?

Mr. SKINNER. I have been there a little over six years.

The CHAIRMAN. You were appointed in Dr. Richardson's time?

Mr. SKINNER. Yes, sir.

The CHAIRMAN. And you have been there during all the time Dr. White has?

Mr. SKINNER. Yes, sir.

Mr. SMYSER. What is your first name?

Mr. SKINNER. Clinton—C. L.

The CHAIRMAN. What ward are you in charge of?

Mr. SKINNER. Dawes second.

The CHAIRMAN. Have you been in that ward all the time you have been at the hospital?

Mr. SKINNER. No, sir.

The CHAIRMAN. Where were you first?

Mr. SKINNER. I was in Garfield basement there first. I worked two or three days on Oak when I first went there.

The CHAIRMAN. What wards have you been in since Dr. White has been there?

Mr. SKINNER. I think Gray Ash and Garfield First and Dawes building. I think those are all the wards I have worked in since he has been there.

The CHAIRMAN. Since you have been there have you ever seen any cases of unnecessary cruelty to patients?

Mr. SKINNER. No, sir.

The CHAIRMAN. Did you ever see patients restrained, or did you ever restrain them yourself in any way?

Mr. SKINNER. Yes, sir.

The CHAIRMAN. How?

Mr. SKINNER. With this jacket with sleeves to it, long sleeves to it, long sleeves.

The CHAIRMAN. Did you do that according to the direction of some of the doctors?

Mr. SKINNER. Yes, sir; or when the foreman of the ward told me the doctor had told him to put a jacket on a certain patient, we went for him and put it on.

The CHAIRMAN. Is that done very often?

Mr. SKINNER. It is not done now anywhere under my observation. It is not necessary in the ward where I am. It has been done. Is that what you mean, in that ward where I was?

The CHAIRMAN. Yes.

Mr. SKINNER. Yes, it was done while I was in Gray Ash.

The CHAIRMAN. Was it customary to put these jackets on frequently—every day, or something of that kind?

Mr. SKINNER. No, sir; not every day; only when there would be such patients as the doctor would deem it necessary to put them on.

The CHAIRMAN. Patients, you mean, that were particularly disturbed?

Mr. SKINNER. Yes, sir; that were obstreperous patients, patients that were disturbed, as you say, and who would continually get into a racket and who were liable to do some harm.

The CHAIRMAN. You mean harm to themselves or harm to other patients?

Mr. SKINNER. Harm to anybody in the ward. They are liable to get into a controversy with anybody.

The CHAIRMAN. Did you know a patient by the name of Kinsey?

Mr. SKINNER. Yes, sir.

The CHAIRMAN. Did you ever have any trouble with him? Was he under your care directly?

Mr. SKINNER. Well, I was on the ward he was on. I was not in charge of that ward, but I remember him very well, now.

The CHAIRMAN. What sort of a patient was he?

Mr. SKINNER. Well, he was a real excited sort of a fellow. I remember when he came in there once—I don't know whether he was there any more than once or not. He did not want to bathe and one of the supervisors, I think Mr. Burch, and a couple of other attendants, had to force him to bathe.

Mr. HAY. Did they use any unnecessary harshness about that?

Mr. SKINNER. No, sir.

The CHAIRMAN. Were you on the same ward as Lloyd, who left the stand?

Mr. SKINNER. I was, for a while.

The CHAIRMAN. Which ward was that?

Mr. SKINNER. Gray Ash.

The CHAIRMAN. What do you think about the food in the institution? What have you to say about the food in the institution now?

Mr. SKINNER. Well, the food is generally of a good quality, but generally the beefsteak is a little tough—tolerable tough.

The CHAIRMAN. Is there enough of it?

Mr. SKINNER. Yes, sir; there seems to be plenty of it in the attendants' dining room, and when there is not enough in the dining room I take a pan and go and get more, or send one of the other attendants.

The CHAIRMAN. Is there any difficulty in getting it when you send down for it in that way?

Mr. SKINNER. No, sir.

The CHAIRMAN. Do you remember a man by the name of O'Connor, who was an attendant there?

Mr. SKINNER. No, sir.

The CHAIRMAN. You say you do remember him?

Mr. SKINNER. I say I do not. I have heard of that name.

The CHAIRMAN. Patrick O'Connor? He said he was employed in St. Elizabeth's for about thirteen years.

Mr. SKINNER. I don't think I ever worked with him. I don't think I worked a day with him.

The CHAIRMAN. He left the hospital four years ago last Christmas.

Mr. SKINNER. Did he?

The CHAIRMAN. What is your first name? C. L.?

Mr. SKINNER. Yes, sir; C. L.

The CHAIRMAN. Was there a Eugene Skinner there?

Mr. SKINNER. Yes, sir.

The CHAIRMAN. Was he any relation to you?

Mr. SKINNER. Not that I knew of.

The CHAIRMAN. Is he there now?

Mr. SKINNER. Yes, sir.

The CHAIRMAN. Did you ever see any patient choked there?

Mr. SKINNER. No, sir; I never saw any patient choked. I have seen them grappled with, and I have taken hold of them myself at times when they took hold of me, but I never choked them, and I don't think I ever saw a man choke them.

The CHAIRMAN. Did you ever use any more force or harshness than was necessary to keep the patients from injuring other patients, or from injuring other attendants, or from injuring themselves?

Mr. SKINNER. I never did.

The CHAIRMAN. Did you ever see it done? Did you ever see attendants hit patients?

Mr. SKINNER. No, sir; I have never seen them hit patients.

Mr. SMYSER. What did you see them do to patients to restrain them or control them?

Mr. SKINNER. I have seen them put on those jackets at times, and if they didn't want to put them on it would take two or three of us to put them on, if it was a big strong man, like you [Mr. Smyser] or myself, for instance. It is a difficult matter to put a coat on a man when he violently resists, and I have seen them take hold of them and put his arm down while he held it back, and one would hold the sleeve while the other pushed his arm back, and continue that way until they got it on.

Mr. SMYSER. You never saw any choking?

Mr. SKINNER. No, sir.

Mr. SMYSER. Do you know what that expression "towelling" is?

Mr. SKINNER. Yes, sir. I have seen that in the paper several times.

Mr. SMYSER. Did you see it on the patients?

Mr. SKINNER. No, sir.

Mr. SMYSER. Just in the paper?

Mr. SKINNER. Yes, sir; I have seen it in the papers.

The CHAIRMAN. Did you talk to anybody out there at the hospital about the testimony you were going to give here?

Mr. SKINNER. I don't think I have. I don't think I have told any person what I was going to say, for I didn't know I would have a chance to say anything. I didn't know I would be called on.

Mr. WALLACE. Do you know of any patient recently using those saddles and jackets?

Mr. SKINNER. No, sir.

Mr. WALLACE. How far back?

Mr. SKINNER. I don't think I ever saw but one, and that was of whom Mr. Lloyd spoke, by the name of Thornley, when I was on Oak, but he never had that on at any time when he was on any ward that I was on. Afterwards he improved right much, after he came to the ward where I am.

Mr. WALLACE. You do not know the last time the jacket was used on him?

Mr. SKINNER. No, sir. It was used on him in Oak, but it was not used on him in Gray Ash.

Mr. WALLACE. Is it being used now at all that you know of?

Mr. SKINNER. Not to my knowledge.

Mr. HAY. Do you know Mr. Pyles?

Mr. SKINNER. I do.

Mr. HAY. Was he on the ward with you?

Mr. SKINNER. He was a part of the time.

Mr. HAY. Did you ever know him to bathe a ward of patients without being "overseed" by the supervisor?

Mr. SKINNER. I think we have bathed at times when the supervisor did not come in to see us.

Mr. HAY. Why did he not come in; do you know?

Mr. SKINNER. I don't know. I suppose he thought it would be done without his presence, and he, maybe, was somewhere else.

Mr. HAY. How did you bathe them? All right, or how? Did you ever bathe them in the same water?

Mr. SKINNER. No, sir; but I have had patients to step in, though, before you wanted them to get into the water. I have had them to do that several times.

Mr. HAY. Because you could not restrain them?

Mr. SKINNER. Oh, they were just ready to bathe, then, and they did not know any better. They didn't mean to do any harm. They thought it was all right.

Mr. SMYSER. Mr. Skinner, do you know Henry High, a patient out there?

Mr. SKINNER. Yes, sir.

Mr. SMYSER. Was he in Garfield first, under Pyles?

Mr. SKINNER. I don't remember whether he was or not.

Mr. SMYSER. Say in 1904?

Mr. SKINNER. I don't remember whether he was there when I was there or not. I know the man, though.

Mr. SMYSER. Do you know of Pyles's begging for a light diet for several old patients?

Mr. SKINNER. I heard of it, which I think he did. He told me that he was going to make some arrangement to get some diet for some patients.

Mr. SMYSER. And do you know whether he got it or not?

Mr. SKINNER. I don't think that it was issued on that ward.

TESTIMONY OF FREDERICK J. HAWKINS.

FREDERICK J. HAWKINS, being duly sworn, was examined and testified as follows:

The CHAIRMAN. What is your full name?

Mr. HAWKINS. Frederick J. Hawkins.

The CHAIRMAN. Are you employed in St. Elizabeth's now?

Mr. HAWKINS. Yes, sir.

The CHAIRMAN. How long have you been there?

Mr. HAWKINS. I have been there, I think, since April 6, 1904.

The CHAIRMAN. What are your duties there?

Mr. HAWKINS. Well, sir, my duties is to look after the patients.

The CHAIRMAN. At what time? Are you a night or a day man?

Mr. HAWKINS. I am a day man.

The CHAIRMAN. What ward are you employed in?

Mr. HAWKINS. Gray Ash.

The CHAIRMAN. Were you employed in Gray Ash when Mr. Lloyd was there?

Mr. HAWKINS. Yes, sir.

The CHAIRMAN. Did you know a patient by the name of Kinsey?

Mr. HAWKINS. Kinsey? I think I was on the ward a short time with Mr. Kinsey.

The CHAIRMAN. Did you ever hear of Lloyd twisting the arm of this man by the name of Kinsey?

Mr. HAWKINS. No, sir; I did not.

The CHAIRMAN. Did you ever hear of any such occurrence happening in your ward at any time?

Mr. HAWKINS. No, sir.

Mr. SMYSER. Are you not the same man that some witness said would run around with a wire in his pocket to hit a fellow with?

Mr. HAWKINS. Yes, sir; I am the man.

The CHAIRMAN. Did you ever do such a thing?

Mr. HAWKINS. No, sir; never, sir.

The CHAIRMAN. Who was the man who said you did that?

Mr. HAWKINS. Belt, I think.

The CHAIRMAN. Did you and Belt ever have any row, so that he would be likely to lie about you?

Mr. HAWKINS. None that I know about.

The CHAIRMAN. Was there no occurrence that you know of that would give justification to a statement of that kind?

Mr. HAWKINS. None that I could think of.

The CHAIRMAN. Did you ever hit a patient with anything like a telephone wire or a telegraph wire, or anything of that kind?

Mr. HAWKINS. I never did.

The CHAIRMAN. Did you ever have a piece of wire for any purpose of that sort?

Mr. HAWKINS. Never. I did not have a wire for any purpose in that ward. I didn't have any occasion to have it.

The CHAIRMAN. Did you ever see any loose pieces of telephone wire around there?

Mr. HAWKINS. Only when those men were putting up those fire alarms.

The CHAIRMAN. Just while they were putting them there?

Mr. HAWKINS. Just while they were putting them up.

The CHAIRMAN. And if they left any pieces of wire there they were cleaned away immediately?

Mr. HAWKINS. Yes.

Mr. SMYSER. Didn't you sneak a piece?

Mr. HAWKINS. No, sir; I did not.

The CHAIRMAN. Do you know of any cases of unnecessarily cruel treatment of patients out there?

Mr. HAWKINS. I do not, sir.

The CHAIRMAN. Suppose a patient would get fractious? How do you calm him down?

Mr. HAWKINS. If one man could not take hold of him and handle him, we generally called another man to help handle the man. That is the best way we have to handle them down there.

The CHAIRMAN. Do you ever put jackets on?

Mr. HAWKINS. I never seen but one man in the ward with a jacket on.

The CHAIRMAN. In the two years you have been there?

Mr. HAWKINS. In the two years I have seen one man with a jacket on, sir.

The CHAIRMAN. Was that put on by the doctor's direction?

Mr. HAWKINS. Mr. Hogan had charge of the ward at the time. He said it was put on by the doctor's direction.

Mr. HAY. Do you belong to the union out there?

Mr. HAWKINS. No, sir; I do not. I was speaking of joining it when I first went there, but it occurred that I didn't join it.

Mr. HAY. What have you to say about the food?

Mr. HAWKINS. I think the food is fairly well, as well as could be expected. Of course the quality could be better, and it could be worse. There could be some improvement made in the cooking, but the food is good wholesome food.

Mr. HAY. How many attendants are there on the ward you are on?

Mr. HAWKINS. There are four, the best portion of the time, and sometimes three.

Mr. HAY. What class of patients do you have there?

Mr. HAWKINS. A very rough disturbed class of patients.

Mr. HAY. There are four on in the daytime and how many at night?

Mr. HAWKINS. One at night.

Mr. HAY. What do you have to say about whether or not it would be to the benefit of the patients to have more attendants?

Mr. HAWKINS. On my ward I think I have plenty of attendants. I have four. The ward only consists of 21 patients at the time being. It generally runs from 21 to 24.

Mr. HAY. Twenty-one patients and 4 attendants?

Mr. HAWKINS. Yes.

Mr. HAY. Are you in charge of the ward?

Mr. HAWKINS. Yes, I am in charge of the ward and have been since December, I think, as well as I can remember.

The CHAIRMAN. I want to read you what Mr. Belt says. Mr. Belt said: "Mr. Hawkins, one of the attendants there, carries a wire and strikes the patients across the head when they don't mind him as he thinks they ought to." Is there any truth in that at all?

Mr. HAWKINS. There is not any truth in it at all. I see there where he made a statement in the paper that he worked under me. He never worked under me a minute, to my knowing, while I was there. If he worked on the ward he worked there in my absence. He said he would have reported this only he was working under me. He never worked under me.

Mr. HAY. He never was in your ward at all?

Mr. HAWKINS. If he was at any time, it was in my absence.

Mr. HAY. What ward was he on? What ward did he work on?

Mr. HAWKINS. As well as I can remember—I wouldn't like to say positive—it was Dawes Third and Garfield First, as well as I can remember. The other wards through the institution I couldn't say. Perhaps he might have worked on the B building before I came on that side, but I wouldn't like to say.

Mr. WALLACE. You spoke of a man who wore a jacket. Do you know what his name was?

Mr. HAWKINS. His name was Fenton.

Mr. WALLACE. How long ago was that?

Mr. HAWKINS. To the best of my memory that has been, I think, he put that jacket on somewhere in November, as well as I remember. I wouldn't like to say positive.

Mr. WALLACE. When was it taken off?

Mr. HAWKINS. I couldn't exactly say when it was taken off. It was only kept on him a short time. He was a suicide patient and it was only put on when it was necessary to be put on. As soon as he calmed

down we would take the jacket off of him and perhaps set right down by him and stay with him.

Mr. WALLACE. Is he there now?

Mr. HAWKINS. He is on the ward now.

Mr. WALLACE. Does he use the jacket yet?

Mr. HAWKINS. No, sir; we don't use the jacket or any restraint on him at all.

The CHAIRMAN. Mr. Belt states that he was on the Gray Ash ward with you.

Mr. HAWKINS. Sir, he never was on that ward a minute with me, unless he was there when I was absent. I was absent if he worked on that ward. I never worked on the ward with him.

The CHAIRMAN. You never worked on a ward with Joseph Belt?

Mr. HAWKINS. I never worked on the ward with him.

The CHAIRMAN. Was there any other man by the name of Hawkins there on Gray Ash that you know of?

Mr. HAWKINS. No, sir. I have a brother that I think is in Howard Hall, or at the annex—I wouldn't say positive which. I think at the annex.

The CHAIRMAN. Did you know an attendant by the name of Hogan?

Mr. HAWKINS. Yes, sir.

The CHAIRMAN. Did he work with you?

Mr. HAWKINS. Yes, sir.

The CHAIRMAN. On Gray Ash ward?

Mr. HAWKINS. Yes, sir.

The CHAIRMAN. Did you ever see him hit a patient by the name of Daddysman?

Mr. HAWKINS. I never did.

The CHAIRMAN. Do you remember Daddysman?

Mr. HAWKINS. Yes, sir.

The CHAIRMAN. What sort of a patient was he?

Mr. HAWKINS. He was a patient that was very much disturbed at times.

The CHAIRMAN. Did you ever have any trouble with him?

Mr. HAWKINS. I had trouble in this way: He had trouble with the patients and with the attendants too. He would imagine that you were keeping him there, that you had something to do with his being there. He never could tell why he was in the ward of the institution, and thought that he did not have a right to be there.

The CHAIRMAN. That is a pretty common idea that insane people have, is it not?

Mr. HAWKINS. Oh, a great many of them have it, sir.

The CHAIRMAN. Did you ever know of a revolver being fired off in Gray Ash ward?

Mr. HAWKINS. Never to my knowing, sir.

The CHAIRMAN. This Mr. Daddysman says that an attendant by the name of Bob Hogan got a revolver and shot it down on the floor. Did you ever see anything of that kind?

Mr. HAWKINS. I never heard anything of it, sir. I never saw it or heard anything of it.

The CHAIRMAN. That would be a pretty serious thing, for anything of that kind to happen?

Mr. HAWKINS. It certainly would.

The CHAIRMAN. Would not the supervisor hear of it?

Mr. HAWKINS. The doctors would be apt to hear of it, and also the supervisors. Mr. Hogan was not that kind of a man.

The CHAIRMAN. You are Fred Hawkins?

Mr. HAWKINS. Yes, sir.

The CHAIRMAN. This man Daddysman was in the asylum at some time, was he not?

Mr. HAWKINS. He was on the ward with us a short time.

The CHAIRMAN. This is what he said:

Then that night he —[he is now referring to Hogan]—he got a revolver out of his pocket and he shot it down on the floor. I don't know what the object was in doing that, but anyhow he just took the revolver and shot it, just running a bluff, I suppose. Of course I was easily handled. I wasn't looking for trouble. I didn't go over there for trouble. A few days after that I was sitting back in the back department, reading, and of course there was some wrangling there, and the first thing I got a punch right on the jaw. It was a good one, too. It blacked my eye. So I jumped up real quick and tried to defend myself.

Do you know of any such transaction as that?

Mr. HAWKINS. No, sir; never.

The CHAIRMAN. [Reads:]

I eventually broke loose and fell on the floor, and they kicked me all over the floor.

Mr. HAWKINS. No, sir; that is wrong.

The CHAIRMAN. That is in his statement. Has that ever happened?

Mr. HAWKINS. Never to my knowledge.

The CHAIRMAN. You would know it if it had happened, because it was done by you and Hogan.

Mr. HAWKINS. I did not do it, and Hogan did not, either.

The CHAIRMAN. That is absolutely untrue, is it?

Mr. HAWKINS. It is absolutely untrue, such a statement as that.

Mr. WALLACE. How many suicides have there been in the asylum since you have been there?

Mr. HAWKINS. I couldn't say. In fact, I think I have at this time six or seven, if I am not mistaken, on my ward.

Mr. WALLACE. I mean suicides—that is, dead suicides.

Mr. HAWKINS. I have had one there, sir.

Mr. SMYSER. Mr. Hawkins, did you have any talk about being a witness here with anybody?

Mr. HAWKINS. I do not remember having any talk, sir. I did not know that I would be called as a witness.

Mr. SMYSER. Did you not have a talk last week with Dr. White?

Mr. HAWKINS. Yes, I was over to Dr. White's office. I thought you meant out around the grounds. I was over to Dr. White's office. Well, I wouldn't say when.

Mr. SMYSER. Did he tell you what to say?

Mr. HAWKINS. He did not. He never told me anything what to say.

Mr. SMYSER. Did he ask you what you knew?

Mr. HAWKINS. Well, he asked me if I knew anything. He asked me if I knew of any cruelty, and I told him no, sir; I did not.

Mr. SMYSER. How old are you?

Mr. HAWKINS. I am thirty-five years old.

Mr. SMYSER. What do you weigh?

Mr. HAWKINS. I weigh about 214 pounds.

Mr. SMYSER. What did you weigh when you went in there?

Mr. HAWKINS. About 150 pounds.

Mr. SMYSER. I knew I would strike some fellow who had fared well out there. You are just my weight, and I think more of you now.

The CHAIRMAN. Do you come from Ohio?

Mr. HAWKINS. No, sir; from Virginia.

The committee (at 4 o'clock p. m.) adjourned until to-morrow, Wednesday, May 23, 1906, at 10 o'clock a. m.

HOUSE OF REPRESENTATIVES,

Washington, D. C., May 23, 1906, 10 o'clock a. m.

The committee met pursuant to adjournment.

Present: Messrs. Olcott (chairman), Smyser, Barchfeld, Hay, and Wallace.

Present also: Dr. William A. White, Stuart McNamara, Dr. Logie, Mr. Evans, Thornton O. Pyles, and others.

TESTIMONY OF DR. B. R. LOGIE.

Dr. B. R. LOGIE, being first duly sworn, was examined, and testified as follows:

Mr. SMYSER. Are you connected with St. Elizabeth's Hospital?

Dr. LOGIE. Yes, sir.

Mr. SMYSER. How long have you been connected with it?

Dr. LOGIE. Since the 15th day of February, 1901.

Mr. SMYSER. What is your position?

Dr. LOGIE. I am an assistant physician.

The CHAIRMAN. You went there under Dr. Richardson?

Dr. LOGIE. Under Dr. Richardson.

Mr. SMYSER. You have been there ever since Dr. White has been superintendent?

Dr. LOGIE. Yes, sir.

Mr. SMYSER. How did you get your appointment?

Dr. LOGIE. Through a competitive civil-service examination.

Mr. SMYSER. Where was your examination taken?

Dr. LOGIE. In New York City.

Mr. SMYSER. Under the supervision of the Civil Service Commission?

Dr. LOGIE. Yes. The examination, as I understand it, was held all over the country for applicants everywhere, and they had one man who looked after the examinations at the time they were held. As I understand it, the papers are forwarded to Washington and reviewed.

Mr. SMYSER. The result is determined here?

Dr. LOGIE. The result is determined here.

Mr. SMYSER. Are you a graduate from some medical school?

Dr. LOGIE. Yes; I graduated from the University of Maryland in Baltimore.

Mr. SMYSER. Under Dr. White what particular place do you hold?

Dr. LOGIE. Assistant physician.

Mr. SMYSER. What are your particular duties and what have they been under him?

Dr. LOGIE. I am what is termed an assistant physician of the senior grade. The hospital is divided into various departments, and I

have charge of one of those departments. The department I have charge of is known as the Richardson group, named in honor of the former superintendent, Dr. Richardson.

Mr. SMYSER. How many patients have you in the group under your supervision?

Dr. LOGIE. I have 371 when my capacity is filled. Sometimes I have one or two vacancies. I think to-day I have two vacancies, but we will call it 371.

Mr. SMYSER. Has that been a fair average of the number of patients since you have been there?

Dr. LOGIE. A constant average.

Mr. SMYSER. Have you an assistant?

Dr. LOGIE. I have not.

Mr. SMYSER. What do you do in the way of looking after your three hundred and seventy-odd people?

Dr. LOGIE. I have absolute charge of everything pertaining to the care of those 371 patients, and am responsible to the superintendent for everything in the department. I have to look after all the sick. I have to look after all of the employees and keep my force up, and follow them up, to see that they look after the patients and obey the rules. I am responsible for the food, in so far as that if it is not up to the standard I am compelled to report it or bring it up to the standard. In that way I exercise absolute supervision over everything in the department, from the beginning to the end.

Mr. SMYSER. The clothing, the bathing, and the treatment?

Dr. LOGIE. Clothing, bathing, treatment, and everything.

Mr. SMYSER. In short, you are required to exercise full and plenary supervision in all particulars?

Dr. LOGIE. In every particular; yes, sir; except possibly the kitchen. I have nothing to do with the preparation of the food. That is under a separate department of the hospital; but when the food is delivered to my wards, then it comes under me. I have the power to, and I am supposed by the superintendent to, correct anything that goes wrong in the kitchen. If it is something that is out of my department I report the matter to the superintendent in order that he may take it up.

Mr. SMYSER. How frequently have you visited the patients under your charge, with a view to affording medical attention?

Dr. LOGIE. I make one thorough and complete round through the entire department once every day. As a rule, I go through this round in the morning; but sometimes I am kept pretty busy by having other things to do, and may be delayed until the afternoon. Then, of course, I finish up the round.

Mr. SMYSER. Does that give you time enough to see these 371 people medically?

Dr. LOGIE. I think so. I have never known anybody to suffer for lack of medical attention there.

Mr. SMYSER. Now go ahead.

Dr. LOGIE. In the afternoon I always make a thorough and complete round of what we term building R, which is my hospital and infirmary building, and as a rule I go through building P. If I am not busy and have sufficient time, I stop in the other two buildings and talk with the patients. I do that as a mere matter of passing away the time rather than for the purpose of affording them any relief

in those two buildings. The P building and the R building I generally visit twice every day.

Mr. SMYSER. Has that been your custom under Dr. White?

Dr. LOGIE. It has been my custom under Dr. White. Then, of course, you will remember that we have a great many additional calls, particularly to building R. I am sometimes called there as many as four or five times in a day.

Mr. SMYSER. How do you endeavor to look after your patients medically?

Dr. LOGIE. That depends very largely upon the individual case. I have the chronic service, and most of these people in the chronic service are people who have come through the acute service, have been treated for their insanity, and have been regarded as chronic and incurable cases and as such have been transferred to me. Occasionally we have acute cases drift in, and they are given treatment suitable to them. Sometimes we use opium in cases of depression. We use a good many tonics. Occasionally we use other sedatives. Then we use a good many packs. We use massage, and of course we use a good bit of exercise. In addition to that we straighten out any organic trouble they may have, any disease of the intestines or of the stomach.

Mr. SMYSER. Is that a summary of your treatment?

Dr. LOGIE. That is a summary of the medical treatment of the patients; yes, sir.

Mr. SMYSER. Since you have been in charge there have any of the patients suffered for the want of medical attention, to your knowledge?

Dr. LOGIE. No, sir; to my knowledge they have not—in my department, of course. It is understood that all of this testimony refers to my department, I presume.

Mr. SMYSER. Yes, sir. What are your hours? Are you on duty at night?

Dr. LOGIE. No; we have a physician in charge of the night force. I go on duty in the morning at 6 o'clock. Naturally I am not up at that time, but I am subject to call. I get to my office at about a quarter of nine in the morning, and generally look over any mail I have of a personal nature. By nine o'clock I start out on my service, and from then on I am pretty busy until, as a rule, about half past eleven or twelve o'clock. I then come into the office, and by that time the hospital mail has come in.

The patients' friends have written to us and we review that mail. By that time it is lunch time. Generally, at half past 1, we go to the office and take up the mail that has come in the day before. We are allowed twenty-four hours to get our letters out of the hospital. In other words, if we receive a letter to-day the answer must go out to-morrow, so that we are always one day behind, as a rule. By the time I have dictated these letters it is about 2 o'clock. Then I go out to my wards and remain until 4 and sometimes until 5 o'clock. That is the regular routine of the work. I am subject to all up to 9 o'clock at night, when the night medical officer comes on duty.

Mr. SMYSER. That is your daily routine?

Dr. LOGIE. That is my daily routine; yes, sir.

Mr. SMYSER. Right in that connection; do you get much mail from the friends of the patients?

Dr. LOGIE. Yes, we get a good bit of mail.

Mr. SMYSER. What do you do in the way of taking care of that correspondence? Do you throw it in the waste basket or answer it?

Dr. LOGIE. We answer it, absolutely, every letter, unless it is a letter written to us thanking us for some letter we have forwarded. Those letters we do not answer. But if they write to us and thank us for the care of a case, we naturally answer that out of courtesy. Every letter is answered, and, wherever possible, within twenty-four hours. That rule was inaugurated by Dr. White when he came there and has been, so far as I am personally concerned, faithfully observed.

Mr. SMYSER. What sort of attendants have you?

Dr. LOGIE. I have the best attendants I have ever seen, I think, and I have seen a good many.

Mr. SMYSER. How many have you on duty?

Dr. LOGIE. I have on duty to-day 40 attendants. I am entitled to three more attendants. In other words, I have three vacancies, but I have 40 on duty to-day.

Mr. SMYSER. What do you say as to having a sufficient force in the department under your supervision.

Dr. LOGIE. When we have our full quota of attendants, we have a sufficient number. I think to put more attendants in there would be an expense which would not be warranted. We are able to give the patients first-class care, when we have our full quota of attendants.

Mr. SMYSER. In your judgment, do they lack anything by way of attention and care from the attendants, so far as you can observe?

Dr. LOGIE. No; except, of course, in isolated cases, I think, such things do occur. But steps are always taken to remedy things of that kind at once. I have never known of any great amount of lack of care, and I can not recall at the present time a specific instance in which there was any lack of care.

Mr. SMYSER. You endeavor to obviate that as far as possible?

Dr. LOGIE. We always obviate it; yes, sir. I think that those cases are very few.

Mr. SMYSER. How are your attendants in the treatment of their patients?

Dr. LOGIE. They are very kind and very gentle and very patient. They are the most patient men, I think, I have ever seen.

Mr. SMYSER. Is that one of the requirements?

Dr. LOGIE. Yes, sir; we have to have patient men. An impatient man can not get along in a hospital at all, and it generally ends up in his showing his impatience by rough handling or by speaking roughly to the patients, and we get rid of him as soon as possible.

Mr. SMYSER. What do you know about the cruel treatment of patients?

Dr. LOGIE. Well, we have a pretty big house over there and we employ quite a number of people. It occasionally happens that an attendant drifts in there who will, when he is by himself, perhaps, or when none of the officers and supervisors are around, mistreat a patient.

Mr. SMYSER. Have you known such instances?

Dr. LOGIE. I have known such instances.

Mr. SMYSER. What would you do in those cases?

Dr. LOGIE. I can recite three instances, two of which are complete, and one of which happened so long ago that I have forgotten the

name of the patient. The most recent instance was that of a man by the name of Otis Wilson.

Mr. SMYSER. Let us have that.

Dr. LOGIE. This man was on a ward and it was shaving day. He had some trouble with a patient, and the supervisor, Mr. Carter, happened to come in just at the critical moment, and he saw this man Wilson strike the patient. He reported it to me and I suspended him at once. I reported the matter to Dr. White, with the recommendation that he be dismissed, and Dr. White dismissed him.

Mr. SMYSER. He was dismissed for that kind of treatment to a patient?

Dr. LOGIE. Yes, sir.

Mr. SMYSER. What did you do, if anything, by way of satisfying yourself as to the treatment accorded the patients by this man Wilson?

Dr. LOGIE. I went over there, by the way, in company with Dr. White and we looked the matter up very thoroughly. We took the evidence of the other attendant in the ward, a man by the name of Ferguson. He said that Wilson did not strike this man. We took the evidence of a man who was formerly at the institution, by the name of Perry. He was a barber, and Mr. Perry said that Wilson did not strike this patient; that he thought he was only fooling with him. We could not find any bruises on the patient. We stripped him and looked him over, but we did not see any bruises. Mr. Carter said that he saw him strike him, and if a dozen people said otherwise I do not think we could have helped but dismiss him. It seems to me that a man who saw him and was an eyewitness of the thing ought to have been believed.

Mr. SMYSER. You acted on that theory?

Dr. LOGIE. We acted on that theory. If there was any doubt about it whatever the man had to go.

Mr. SMYSER. Now, give us the other case. You said you had two cases in mind.

Dr. LOGIE. Yes, I have two cases in mind. The other case is that of a man by the name of Hodges, and occurred on the 24th day of December last. I think Mr. Hodges maybe had gotten a little too much Christmas on board. He was universally kind to his patients.

Mr. SMYSER. Right in this connection, what is the name of the Mr. Carter of whom you have spoken?

Dr. LOGIE. J. S. Carter.

Mr. SMYSER. Now let us go back to our Christmas friend. What about him?

Dr. LOGIE. He had gotten a little too much Christmas on board, I think. We had him located in a ward which we call the R building one. There was an epileptic located in that ward, confined to his bed. As I went in to make my afternoon round I saw Mr. Hodges attending to his patients. He was making the rounds himself. I do not know what provoked the thing, but anyhow I saw him raise up his hand and come right down on the man's stomach. Two minutes after that, of course, he was off the ward. I saw that personally and I suspended him. I reported the matter to Dr. White and he upheld me in it. There was no other investigation made in that case. I saw that personally.

Mr. SMYSER. You felt justified in acting on what you had seen?

Dr. LOGIE. Yes, sir.

Mr. SMYSER. And you discharged him?

Dr. LOGIE. Yes, sir.

Mr. SMYSER. Would you tolerate such treatment as you witnessed there?

Dr. LOGIE. No, sir; that is never tolerated at St. Elizabeth's.

Mr. SMYSER. Do you know of any instance where the abuse of patients has been tolerated at St. Elizabeth's and has not resulted in the discharge of the employee?

Dr. LOGIE. I might state one case of that kind. I do not think, though, that is testimony which I would particularly care to give in the presence of ladies. If you want it, it is at your disposal.

Mr. SMYSER. Ladies, you have heard what the witness has said; perhaps you had better step outside.

(The ladies withdrew from the room.)

Dr. LOGIE. This case occurred, as well as I can place it, early last fall or perhaps in the middle of last summer. This patient was a powerful, big, well-built fellow, just as muscular as he could possibly be. I transferred him from building R, which is the infirmary ward, to building P, which is the ward where we keep the strong patients.

This man was not excited and was not disturbed. He got up there with the attendants, and a man by the name of Davis, who is an attendant there, got into a mix-up with him. I never could find out how that thing came about. At any rate the patient complained to me of being struck by an attendant several times, and I reckon he was, I have no doubt about it at all. On the other hand I was called to see Davis, and I found him suffering from prostration. He had a wound on his arm inflicted by the patient's biting him. He explained to me, and the other attendants did also, that this man had grabbed him by the privates, and was trying to pull them off, and the man struck the patient in self-defense. It was obvious that he had suffered, from a medical standpoint, from that very thing.

I went over and reported the matter to the superintendent, and I told him I did not think the man ought to be dismissed, that the patient was not hurt and that I thought the man had acted in self-defense. Under the circumstances I recommended that the matter be overlooked. He said that he would take my recommendation in the matter. Apart from that I know of no instance of that character that has ever occurred at St. Elizabeth's.

Mr. SMYSER. What would you say under circumstances of that kind? Would an attendant be justified in protecting himself?

Dr. LOGIE. Most assuredly. He was not a married man, but still I think he was thoroughly justified? I do not believe I could stand that. If a man pulls on you there as hard as he can, it hurts badly. I think he was justified.

Mr. SMYSER. If you jump on to one of these old cavalry saddles you will know something about that.

Dr. LOGIE. Yes, sir; and if you go to a camp-meeting and sit on the two ends of a bench and they come together and pinch you there it hurts a great deal.

Mr. SMYSER. While you were satisfied that the attendant did strike the patient, from all the information you could gather, and the attend-

ing circumstances under which it was done, you did not feel warranted in discharging that attendant?

Dr. LOGIE. No; I did not.

Mr. SMYSER. What kind of an attendant was he?

Dr. LOGIE. He was a good man—a very good man.

Mr. SMYSER. An even-tempered man?

Dr. LOGIE. Yes; he was an even-tempered man, reliable, and strictly sober.

Mr. SMYSER. And had control of himself?

Dr. LOGIE. Yes, sir; he had control of himself.

Mr. SMYSER. He was not discharged?

Dr. LOGIE. No, sir.

Mr. SMYSER. Are there any other instances that you have in mind?

Dr. LOGIE. I had recalled to my mind last night one case of a man named Norman Hill, who was discharged in 1904. I do not remember the circumstances of his discharge, but he was discharged for abusing the patients.

Mr. SMYSER. I want to summarize this. Do you know of any instances where cruelty has been exercised by an attendant toward the patients, that was without justification, when the attendant was not discharged?

Dr. LOGIE. No, sir; no case, absolutely. That is not permitted for an instant by anybody.

Mr. SMYSER. What is done by way of restraining patients?

Dr. LOGIE. Well, sir, we use restraints. I have four methods of restraint. I have what is known as the camisole. I have what is known as the sheet. I have a pair of muffs and I have a set of wristlets. Those are used whenever in our estimation the occasion demands it.

Mr. SMYSER. Just describe the muffs. It has been called to my attention that they have not been particularly described before.

Dr. LOGIE. The muff consists of a broad piece of leather which is made very much like a lady's muff. On the inside of these muffs are little straps which buckle over each wrist. They are first put on and then these straps are buckled, and then the entire muff is folded around, and it has staples in it which fasten, and then they are locked,

Mr. BARCHFELD. There is nothing cruel in the use of the muff?

Dr. LOGIE. Absolutely nothing.

Mr. SMYSER. Is there any such thing as cruelty over there by restraint, in any of the methods you have for restraining patients?

Dr. LOGIE. Not a particle.

Mr. SMYSER. Would you tolerate any cruelty of that kind?

Dr. LOGIE. No; there is nobody who would dare use restraint over there without the order of the physician. If an attendant puts restraint on without an order he is dismissed. Nobody can put restraint on in my building without my personal orders, or he is dismissed. He would not think of doing such a thing. You could not induce him to do it, unless he wanted to be dismissed. Naturally I don't think that any restraint I use is cruel. I am perfectly willing to defend absolutely every particle of restraint I ever used. There is no cruelty whatever in that way.

The CHAIRMAN. How about the food there? What do you think of the food?

Dr. LOGIE. The food proposition is a pretty big one. I think,

though, that we have solved the food proposition in the Richardson group in pretty good shape. It compares favorably with the diet which is furnished in other institutions. I have taken the trouble to look over the diet list of a number of institutions, before I came down here, and the diet list of St. Elizabeth's appears in the most recent book published on dietetics in this country. It is used as a model, so to speak.

The CHAIRMAN. Where can the committee get that book?

Dr. LOGIE. We can furnish it to you.

The CHAIRMAN. Will you send it to us?

Dr. LOGIE. Yes; we will send it to you. It is prepared by a Baltimore man named Freidenwald. I have here the diet list that is supplied at the United States Army General Hospital in this city. I have their diet list day by day for a certain time and my own diet list for a certain time. There are one or two things that the dietitian left off from here. We have tea every evening for supper, and we have meat for the workers.

The CHAIRMAN. Write that onto your list, and we will put them both in the record, for comparison.

The diet lists referred to are as follows:

Bill of fare at St. Elizabeths.

SUNDAY, MAY 6, 1906.

Special.	House.
Breakfast:	Breakfast:
Rolled oats.....	Rolled oats.
Boiled eggs.....	Baked beans.
Fried potatoes.....	Rolls and coffee.
Toast and coffee.....	
Dinner:	Dinner:
Baked chicken.....	Roast beef and gravy.
Mashed potatoes.....	Browned sweet potatoes.
Peas and rice.....	Lima beans.
Lemon jelly.....	Pie and coffee.
Supper:	Supper:
Sliced ham.....	Cake.
Strawberries.....	Peach sauce.
Toast.....	
Tea for supper. Meat for workers.	*Tea for supper. Meat for workers.

MONDAY, MAY 7, 1906.

Breakfast:	Breakfast:
Rolled oats.....	Fried hominy.
Fried ham.....	Smoked sausage.
Toast and coffee.....	
Dinner:	Dinner:
Beef tea and crackers.....	Bean soup and crackers.
Beef stew and rice.....	Corned beef.
Mashed potatoes.....	Kidney beans and potatoes.
Baked custard.....	
Supper:	Supper:
Hash and toast.....	Cinnamon bread.
Corn bread.....	Rhubarb sauce.
Rhubarb sauce.....	
Tea for supper. Meat for workers.	Tea for supper. Meat for workers.

TUESDAY, MAY 8, 1906.

Breakfast:	Breakfast:
Rolled oats.....	Stewed peaches.
Veal cutlets.....	Fried mush.
Baked potatoes.....	Rolls and coffee.
Muffins and coffee.....	

Bill of fare at St. Elizabeths—Continued.

TUESDAY, MAY 8, 1906—Continued.

Special.	House.
Dinner: Beef tea and crackers..... Roast lamb..... Mashed potatoes and peas..... Frozen custard.....	Dinner: Beef stew (baked). Boiled rice. Macaroni. Bread pudding and coffee.
Supper: Boiled mush..... Cake and toast..... Apple sauce.....	Supper: Fresh rolls. Apple sauce.
Tea for supper. Meat for workers.	Tea for supper. Meat for workers.

WEDNESDAY, MAY 9, 1906.

Breakfast; Rolled oats..... Fried bacon..... Creamed potatoes..... Toast and coffee.....	Breakfast: Steamed potatoes. Bacon and liver. Rolls and coffee.
Dinner: Pea soup and crackers..... Creamed veal..... Mashed potatoes..... Corn..... Baked custard.....	Dinner: Vegetable soup and crackers. Fresh herring. Macaroni and rice.
Supper: Creamed codfish..... Baked potatoes..... Toast and sauce.....	Supper: Ginger bread. Stewed prunes.
Tea for supper. Meat for workers.	Tea for supper. Meat for workers.

THURSDAY, MAY 10, 1906.

Breakfast: Rolled oats..... Broiled steak..... Baked potatoes..... Muffins..... Toast and coffee.....	Breakfast: Stewed peaches. Fried mush. Rolls and coffee.
Dinner: Beef tea and crackers..... Roast beef and gravy..... Mashed potatoes and peas..... Lemon jelly.....	Dinner: Corned beef. Cabbage and potatoes. Fried onions.
Supper: Baked beans..... Milk toast..... Sugar cakes and sauce.....	Supper: Boiled rice. Fresh bread.
Tea for supper. Meat for workers.	Tea for supper. Meat for workers.

FRIDAY, MAY 11, 1906.

Breakfast: Rolled oats..... Boiled mackerel..... Baked potatoes..... Corn bread..... Toast and coffee.....	Breakfast: Steamed potatoes. Creamed codfish. Rolls and coffee.
Dinner: Pea soup and crackers..... Baked shad..... Potatoes and corn..... Cottage pudding.....	Dinner: Fresh herring. Succotash and boiled rice. Apple pie and coffee.
Supper: Clam chowder..... Crackers..... Boiled rice.....	Supper: Stewed peaches. Ginger cakes.
Tea for supper. Meat for workers.	Tea for supper. Meat for workers.

Bill of fare at U. S. Army General Hospital.

FRIDAY, MAY 11, 1906.

Special.	House.
Light.	House.
Breakfast: (Special.)	Breakfast: (Special.)
Fried eggs.....	Same.
Fried potatoes.....	
Oatmeal and milk.....	
Bread and butter.....	
Coffee.....	
Dinner:	Dinner:
Vegetable soup.....	Vegetable soup.
Spinach.....	Boiled fish.
Boiled potatoes.....	Egg sauce.
Gravy.....	Spinach.
Cornstarch pudding.....	Boiled potatoes and gravy.
Bread and butter.....	Cornstarch pudding.
Coffee.....	Bread and butter.
Supper:	Supper:
Poached eggs on toast.....	Cold roast beef.
Fried potatoes.....	Fried potatoes.
Apple sauce.....	Apple sauce.
Bread and butter.....	Bread and butter.
Tea.....	Tea.

THURSDAY, MAY 10, 1906.

Breakfast:	Breakfast:
Oatmeal and milk.....	Oatmeal and milk.
Boiled eggs on toast.....	Boiled potatoes.
Bread and butter.....	Beef a la mode.
Coffee and milk.....	Bread and butter.
Dinner:	Coffee.
Pouree of potatoes.....	Dinner:
Boiled potatoes.....	Pouree of potatoes.
Gravy.....	Corned beef.
Spinach.....	Cabbage.
Bread custard pudding.....	Boiled potatoes.
Bread and butter.....	Gravy.
Coffee.....	Bread and butter.
Supper:	Coffee.
Creamed chipped beef on toast.....	Supper:
Baked potatoes.....	Same as light.
Apple sauce.....	
Bread and butter.....	
Tea.....	

WEDNESDAY, MAY 9, 1906.

Breakfast:	Breakfast:
Oatmeal and milk.....	Oatmeal and milk.
Boiled eggs.....	Hash.
Bread and butter.....	Fried potatoes.
Coffee and milk.....	Bread and butter.
Dinner:	Coffee.
Pouree of macaroni.....	Dinner:
Browned potatoes.....	Pouree of macaroni.
Gravy.....	Roast beef.
Creamed carrots.....	Browned potatoes.
Baked custard pudding.....	Gravy.
Bread and butter.....	Creamed carrots.
Coffee.....	Baked custard pudding.
Supper:	Bread and butter.
Scrambled eggs.....	Coffee.
Baked potatoes.....	Supper:
Apple sauce.....	Beef stew.
Bread and butter.....	Apple sauce.
Tea.....	Bread and butter.
	Tea.

Bill of fare at U. S. Army General Hospital—Continued.

TUESDAY, MAY 8, 1906.

Special.	House.
Breakfast:	Breakfast:
Oatmeal and milk	Oatmeal and milk.
Boiled eggs	Liver and bacon.
Toast	Fried potatoes.
Bread and butter	Bread and butter.
Coffee and milk	Coffee.
Dinner:	Dinner:
Pouree of tomatoes	Pouree of tomatoes.
Lima beans	Roast lamb.
Boiled potatoes	Boiled potatoes.
Gravy	Gravy.
Apple-tapioca pudding	Lima beans.
Bread and butter	Apple-tapioca pudding.
Coffee	Bread and butter.
	Coffee.
Supper:	Supper:
Poached eggs on toast	Macaroni and cheese.
Baked potatoes	Baked potatoes.
Stewed apples	Cold roast beef.
Bread and butter	Stewed apples.
Tea	Bread and butter.
	Tea.

MONDAY, MAY 7, 1906.

Breakfast:	Breakfast:
Oatmeal and milk	Beef and brown gravy.
Boiled eggs	Boiled potatoes.
Toast	Oatmeal and milk.
Bread and butter	Bread and butter.
Coffee and milk	Coffee.
Dinner:	Dinner:
Vegetable soup	Vegetable soup.
Browned potatoes	Baked pork and beans.
Gravy	Browned potatoes.
Stewed tomatoes	Gravy.
Cottage pudding	Cottage pudding.
Egg sauce	Egg sauce.
Bread and butter	Bread and butter.
Coffee	Coffee.
Supper:	Supper:
Scrambled eggs	Hamburger steak.
Fried potatoes	Onion sauce.
Stewed apples	Fried potatoes.
Bread and butter	Stewed apples.
Tea	Bread and butter.
	Tea.

SUNDAY, MAY 6, 1906.

Breakfast:	Breakfast:
Oatmeal and milk	Same.
Boiled eggs	
Fried potatoes	
Bread and butter	
Coffee and milk	
Dinner:	Dinner:
Purée of split peas	Fricassee of chicken.
Spinach	Spinach.
Baked sweet potatoes	Baked sweet potatoes.
White gravy	White gravy.
Rice pudding	Rice pudding.
Bread and butter	Bread and butter.
Coffee	Coffee.
Supper:	Supper:
Poached eggs on toast	Hot roast beef.
Baked potatoes	Baked potatoes.
Stewed apples	Apple sauce.
Bread and butter	Bread and butter.
Tea	Tea.

Bill of fare at U. S. Army General Hospital—Continued.

SATURDAY, MAY 5, 1906.

Special.	House.
Breakfast:	Breakfast:
Boiled eggs.....	Fried sausage.
Oatmeal and milk.....	Fried potatoes.
Bread and butter.....	Oatmeal and milk.
Coffee and milk.....	Bread and butter.
	Coffee.
Dinner:	Dinner:
Pouree of potatoes.....	Pouree of potatoes.
Creamed carrots.....	Roast beef.
Boiled potatoes.....	Creamed carrots.
Brown gravy.....	Boiled potatoes.
Custard cornstarch.....	Brown gravy.
Bread and butter.....	Apple pie.
Coffee.....	Bread and butter.
	Coffee.
Supper:	Supper:
Poached eggs on toast.....	Soft hash on toast.
Baked potatoes.....	Lyonnais potatoes.
Bread and butter.....	Bread and butter.
Milk and tea.....	Tea.

Mr. SMYSER. My attention is called to the fact that these diet lists are for corresponding dates.

Dr. LOGIE. Yes; they are for corresponding dates.

Mr. SMYSER. That is, while they were eating it at one place you were eating it over there on the same day?

Dr. LOGIE. Yes, sir. Now, the only difference is that this is a hospital diet, and what is marked special diet here in our list is hospital diet in their place. The balance is house diet which we use in the other wards where the patients are not sick. I think it compares very favorably. It is almost identical, so far as the special diet is concerned.

The CHAIRMAN. How about the cooking generally?

Dr. LOGIE. I can only say, in regard to the cooking in the Richardson group, that it is good. I have never seen better in any institution and I do not think I have ever seen any better in a private house than we have in the Richardson group. In the other departments the cooking is very fair, but not as good as it is in the Richardson group. You know there is a difference in cooks.

The CHAIRMAN. You think you have a better cook?

Dr. LOGIE. I know I have; so much so that I sometimes go out there and it is so tempting that I eat things.

The CHAIRMAN. What do you think about the use of oleomargarine instead of butter?

Dr. LOGIE. Well, it is oleo; and of course it is made from beef fat. Butter is more palatable than oleo, and I think the patients would like butter better than they do oleo. So far so good; but on the other hand no man who has ever worked in a hospital for the insane knows the immense difficulties we have to contend with about this butter proposition. You go through your wards in the morning and from the time that you enter your ward until you leave you hear rancid butter dinned into your ears all day long. You examine your butter and you find it is bad. I never hear any complaint about oleo. Once in a while some man complains about it; but as a rule there is very little said about it. The patients eat it.

The CHAIRMAN. What are its health-giving properties?

Dr. LOGIE. I think it is more healthy than most butter that you get, so far as that is concerned. The only difference is that butter is a little more palatable. There is another advantage from the standpoint of economy, of course. Oleomargarine saves us, I think, if I remember correctly, somewhere in the neighborhood of \$9,000 a year just on that one item. That is a matter we have to consider to a certain extent.

The CHAIRMAN. Do you know what you have to pay for oleomargarine?

Dr. LOGIE. No, I do not know. Dr. White took that matter up some time ago when he came there and went into the thing pretty thoroughly. I have no personal knowledge about it. The result of his examination was that we kept on with oleomargarine.

Mr. SMYSER. Have you had experience elsewhere in hospitals?

Dr. LOGIE. Yes; I was in the Manhattan State Hospital in New York.

Mr. SMYSER. How long were you there?

Dr. LOGIE. We had a good deal of difficulty there. The legislature would change us around and give us a new name every once in a while. It was the old New York State Asylum for the Insane when I first entered there in 1893. Later on they were changed to the Manhattan State Hospital for the Insane. Those institutions were under one man, a general superintendent, and were considered as branches—one at Blackwell's Island, one at Central Islip, and two at Ward's Island, making five separate and distinct hospitals practically.

The CHAIRMAN. How long were you there?

Dr. LOGIE. I was there, with the exception of one year, from 1893 until the 15th day of February, 1901, when I came here.

The CHAIRMAN. Were you at Central Islip at one time?

Dr. LOGIE. No; I served at Blackwell's Island. I had two terms of service at Ward's Island and one term of service at Hart's Island.

The CHAIRMAN. Is the Ward's Island Hospital the main hospital there, as large an institution as St. Elizabeth's?

Dr. LOGIE. The female department alone is as large as our institution. The female department had in it at its last report 2,615 patients. That is a little larger than ours. In the male department it had 1,740.

The CHAIRMAN. So that there are a greater number of patients at Ward's Island than there are at St. Elizabeth's?

Dr. LOGIE. Yes, sir; the number of patients at Ward's Island is 4,355.

The CHAIRMAN. On what date were those figures taken?

Dr. LOGIE. They were taken from the last book, I understand. What is the date of the one you have?

The CHAIRMAN. I have here the yearbook of the State commissioner of lunacy of New York State for 1905, and they have on this list Manhattan East and Manhattan West. I think, according to my recollection, both of those are on Ward's Island.

Dr. LOGIE. Yes; but those institutions have been consolidated again and the name changed.

The CHAIRMAN. I have made several visits there, in my own experience, and I know the Central Islip hospital very well. I have been

there a great many times. Have you been at these hospitals recently, at Ward's Island and Central Islip?

Dr. LOGIE. No, sir. I have practically paid only one visit since I left there. We can not get off very much to go around to places of that kind, and I have only been back there once. I have never been to Central Islip, but I have been back to Ward's Island.

THE CHAIRMAN. Can you make any comparison that would be of value to this committee between the hospital of Ward's Island and this one?

Dr. LOGIE. The Ward's Island institutions are, of course, representative institutions of the New York State hospital service. We find that we have a greater proportion of employees here than they have there. As I knew them when I was there, as I am able to compare the general care of the patients with the care which they receive here. From a medical standpoint, the general medical care and treatment given of patients in the Manhattan State Hospital can not be excelled. It is fully abreast of the treatment given here in this institution, and they have most excellent men on the staff. In Ward's Island there is absolutely not the slightest brutality tolerated under any circumstances whatever.

I do not care what it is, there is no justification for a man, and if he does anything that he ought not to do he is dismissed. Give all of that benefit to Manhattan and come down to specific instances, and I want to say that there are a great many more things done in the Government Hospital for the Insane than are done in Ward's Island, due to the fact that we have a little more money and have a chance to do those things. In the first place, we have a better grade of clothing and we have better hats and better underwear. The shoes at Manhattan are, I think, a little superior to the shoes that are furnished here, but that does not amount to anything.

In addition to that there are a great many little things done at St. Elizabeth's that are not done in New York. Our food is better. It is served warmer, and it is a little more abundant. In addition to that, we furnish our patients a good many little extras that they do not get at Manhattan. For instance, I draw every week, in my department, anywhere from one to two gallons of whisky and some wine, and if a patient wants a drink—some of those old soldiers are very fond of having a little drink once in a while—merely to humor them and to please them we give them a drink. In addition to that, I am allowed 37 pounds of chewing tobacco a week, which is distributed to my patients. I am allowed 75 bags of smoking tobacco, together with as many pipes as I want. Those are all distributed to the patients when they want them. Everyone who uses tobacco gets it. In those ways I think we are considerably ahead of Ward's Island.

Another way in which the institution here is superior to the Ward's Island institution is in the treatment of its employees. The employees here have a great deal of liberty as compared to the liberty which is extended to them in that particular institution. There we never allowed men and women to associate together under any circumstances. If we found them talking to each other it was our duty to report the matter, and they were, as they called it there, "called down." In other words, they were reprimanded for it, and if it was continued it meant the dismissal of the attendant. He was dismissed.

Here, I think, with all those points considered, the care at St. Elizabeth's is better in many ways than the care at Ward's Island, and it can not be said to suffer in any way by comparison.

The CHAIRMAN. At Central Islip the distribution of the food is made from one general kitchen, as I recollect it; but in each service room attached to every dining room throughout that very large institution there is a separate steam table. The food when it is brought over in the same manner in which you distribute it at St. Elizabeth's is put on these steam tables and kept warm until the patients are actually seated, so that the food reaches the patients really warm enough to be entirely palatable. Does that system obtain in St. Elizabeth's?

Dr. LOGIE. Do you know I can not answer that question to save my life just now; I don't remember. But we do not have steam tables in my department, because I get my food warm.

The CHAIRMAN. You have a kitchen there?

Dr. LOGIE. But I believe in those new buildings they have, However, I do not happen to remember about that particular point. I do not use them, because I have no use for them.

The CHAIRMAN. You have a kitchen?

Dr. LOGIE. I have two kitchens in my department, and my food is carried by hand from one building to the other. It takes only two or three minutes to carry it, and it is served at once.

Mr. SMYSER. Doctor, do you remember a patient over there—Mr. Washburn?

Dr. LOGIE. Yes, sir.

Mr. SMYSER. Do you remember an occasion when Mrs. Washburn visited him, when his arm was very much swollen and looked as though a rope had been tied around it, and it was cut almost to the bone, and your attention was called to this by her?

Dr. LOGIE. No, sir; my attention was not called to it by her.

Mr. SMYSER. Was your attention called to it by anybody?

Dr. LOGIE. My attention was called to the matter. If I am not mistaken, on Monday morning after her Sunday visit, I was told of her coming over there and objecting to her husband being in that condition. I examined the arm and there was nothing the matter with it. I asked the attendant about it, and one attendant, by the name of Swain—he was the attendant who was there at the time—said the man was lying on his arm, and it was simply swollen a little. Since I read that testimony I asked him about that mark, and he does not know anything about it. He says he presumes the sheet must have made it, but there was nothing the matter with that hand, absolutely.

Mr. SMYSER. I am requested to ask you this question: Do the patients on the west side have summer underwear?

Dr. LOGIE. I do not know, sir. I do not know anything about the west side.

Mr. SMYSER. What about Dr. White visiting your department? Does he ever visit it?

Dr. LOGIE. Once in a while.

Mr. SMYSER. How frequently?

Dr. LOGIE. Dr. White made a thorough and complete inspection of my building—well, I don't know—it was last fall sometime, and I should say it was about October or November. Then he was over

there in December, but he did not make any thorough inspection upon that occasion. He came over to see a lot of patients.

Mr. SMYSER. How frequently does he visit your ward?

Dr. LOGIE. Dr. White has no special days for visiting my ward. He comes over very often and goes through building R more frequently than he does any other building. Then he comes there to consult with me whenever I ask him to do so, or when anything goes wrong in the department.

I have seen him over there quite a number of times, but I do not naturally keep any tabs on him, and I could not say definitely. I can say that he made one thorough inspection about the time I speak of, and I have seen him over there quite a number of times on special business; and a number of times when he was over there I did not know what his business was and I was wondering what he was doing over there.

Mr. SMYSER. How about the board of visitors? Do you often see them?

Dr. LOGIE. I see them. They are over at the hospital once every month. They are over there, and they have a meeting and they discuss the affairs, I presume, of the hospital, and after that they visit some of the wards of the institution. By that time I reckon they are a little tired, and they return home.

Mr. SMYSER. What is the habit of Dr. White when you want to see him specially about a patient? Does he respond or not?

Dr. LOGIE. At once.

Mr. SMYSER. Have you any trouble in that regard?

Dr. LOGIE. Absolutely none. Dr. White, according to my understanding, has issued instructions that his physicians are to come first in all matters of consultation, no matter who he has in his office. If I go in there, or go to the door, the doctor says: "Well, Doctor, I will see you"—and I can tell him what I want and advise and consult with him at once. If I have a patient, as I had some time ago, who had the measles, I reported it to the doctor. Of course it is a disease which we do not want to get scattered around, and he came at once to see that case, and to confirm the diagnosis and directions. Then I remember another case not more than a week or ten days ago, that I wanted the doctor to see specially. He was very busy. I called him up by telephone and he responded at once and came right over and examined the patient and gave me his opinion upon it. In addition to that a great many patients are taken over to his office. If we can save the doctor trouble by going over there, and by taking the patient over to his office, we do it. If they are cases of insanity, in which there is no reason for haste, we take them over to him. He visits his wards, I think, as any other superintendent I have ever seen, and he has more places to go than any other superintendent I have ever been under.

Mr. BARCHFELD. Doctor, do the house physicians and surgeons ever meet for consultation?

Dr. LOGIE. What do you mean by "house physicians;" the resident physicians?

Mr. BARCHFELD. Yes; the resident physicians.

Dr. LOGIE. They meet for consultation.

Mr. BARCHFELD. Do they meet for general discussion, a round robin, as it were?

Dr. LOGIE. Well, we have every Sunday morning what we call a "staff meeting," at which are discussed scientific matters purely relating to medicine. We take in every branch of medicine, and the various journals that are published throughout the country are assigned to different members of the staff for review and they report what they find in those journals. After they have made their reports we all take a hand in the discussion. Dr. White inaugurated that when he came there for the purpose of forcing his staff to keep up with the very latest medical literature.

Mr. BARCHFELD. Do any of the doctors ever read papers?

Dr. LOGIE. Original papers?

Mr. BARCHFELD. Yes.

Dr. LOGIE. Yes; I have known that to happen upon one occasion, I think, only. I know that it happened upon one occasion. No; Dr. White has read one or two original papers in addition.

Mr. BARCHFELD. Did you ever take up the matter of the clothing of the patients?

Dr. LOGIE. No; each man takes that up separately for his own department with the doctor; all matters of that kind.

Mr. BARCHFELD. What is the relationship between the various members of the profession who are residents there?

Dr. LOGIE. You mean the feeling?

Mr. BARCHFELD. Yes, sir.

Dr. LOGIE. Why, there is an exceptionally good feeling. They are all, as we term them, gentlemen, and each man keeps on his own side of the fence and treats the other men courteously and does everything in his power to make life pleasant for his fellow-man. All of them have the interest of the institution at heart and they all seem to be working to that end. There is no discord and no lack of harmony.

Mr. BARCHFELD. Is any man struggling to put his particular department in the front rank?

Dr. LOGIE. Yes; we have struggles about that sometimes.

Mr. BARCHFELD. That is proper and should be encouraged.

Dr. LOGIE. Well, the doctor has done everything in his power to encourage it, but I do not think it needs any encouragement from him, because the men would all do it voluntarily.

Mr. HAY. How many wards have you under you?

Dr. LOGIE. Ten wards.

Mr. HAY. How many of them are hospital wards—that is, I mean where you treat the sick?

Dr. LOGIE. Four of them may be considered hospital wards. I consider them infirmary wards and one a hospital ward.

Mr. HAY. What are the general classes of patients under your control?

Dr. LOGIE. In building R I have a set of old bedridden men—men who are suffering from various nervous diseases. Some of them are suffering, for instance, from post-hemiplegic insanity. Some of them are suffering from paraplegia, some from paralysis and locomotor ataxia, and all those diseases.

Mr. HAY. That is R building?

Dr. LOGIE. Yes.

Mr. HAY. How many wards are there in R building?

Dr. LOGIE. There are four wards in R building.

Mr. HAY. How many attendants are there on those four wards?

Dr. LOGIE. I have fourteen nurses and attendants on those wards, and in addition to that I have two domestics, whom we should count as attendants, because they relieve nurses a good deal in the dining room. On the night force I have five men.

Mr. HAY. Doctor, some complaint has been made, or my attention has been called to the fact that patients in the R building remain in the same bed for a long time. What have you to say about that?

Dr. LOGIE. Well, I don't believe that that happens. If I remember correctly, I discharged a man for that about two years ago. I had not thought about it until just this minute. Let me explain my system in keeping tabs on that. These men soil themselves, and they soil themselves a good deal, some of them four, five, and six times a day. I am through there twice every day, and the supervisors go through. One supervisor goes through four times and the other from three to five times. Then the head nurse is compelled to have a round made once every hour and to inspect every bed and every man. That is the only way we can keep tab on that: I think they do it, because I very seldom find a man there who soils himself. I do once in a while, and perhaps the nurse overlooks it.

Mr. HAY. Then you have to say in response to that that there is no truth in that charge?

Dr. LOGIE. I do not think there is. I can understand how a man would soil himself immediately after a nurse had passed on his rounds and he would not discover it.

Mr. HAY. You have fourteen employees in those four wards in the R building?

Dr. LOGIE. In the daytime.

Mr. HAY. How many at night?

Dr. LOGIE. I have five there at night.

Mr. HAY. That would make in all 19?

Dr. LOGIE. Nineteen, and then the two domestics, which makes 21 people in that building R. I have in addition to that 1 female nurse, and I have 1 female nurse who is absent, who has gone to Europe, and that makes 2 more.

Mr. HAY. That makes 23, then?

Dr. LOGIE. When I get my full force there, yes.

Mr. HAY. You have 43 in all?

Dr. LOGIE. I will have when I get my full force.

Mr. HAY. The other 20 are on the other 6 wards?

Dr. LOGIE. The other 20 are on the other 6 wards.

Mr. HAY. What are the classes of patients on those 6 wards?

Dr. LOGIE. On 2 of the wards—building I and building N—we have nothing but selected cases; that is, cases that are selected in such manner as to be able to take care of themselves. They must be quiet, they must be cleanly in habits for the most part, and they must be able to keep free from any objectionable traits, such as fighting and things of that kind.

Mr. HAY. So they are patients who are able to take care of themselves to a large extent?

Mr. LOGIE. To a large extent.

Mr. HAY. And therefore they do not need as much attention as the others?

Dr. LOGIE. No, sir; they do not need anything like as much attention. In the other four wards, in building P, we have a sort of a mix-

ture. In P 1, I call that my working ward because I have a number of men there who work. That is, these men are taken out there every day by the attendants and they work around on the lawns and grounds, etc. All the other men in that ward, while they do not work, are thoroughly quiet and never give any trouble whatever. So that we have there a quiet ward. Now, in the ward opposite that, which is P 3, we have a quiet class of men. They are selected with a view of getting men who are quiet and who will not escape, because the ward is not a closely guarded ward, you understand, and therefore those men do not require a great deal of attention. Upstairs we put our escape patients, in the same P building, and patients that are noisy we put there. If we have a man who develops a tendency to fight, we generally put him up there.

Mr. HAY. How many attendants do you have up there?

Dr. LOGIE. Two attendants in each one of the wards.

Mr. HAY. And you think you have attendants, when you have all your attendants present, to enable you to take care of them?

Dr. LOGIE. Yes, sir; we will have ample attendants when we have them all present.

Dr. HAY. Some of the patients call your building over there Siberia, do they not?

Dr. LOGIE. I suppose they do. I never heard that, though, but it is on an isolated waste, so to speak.

Mr. HAY. How about the cold there? Is it very cold in the building? Do you have any trouble about heating the buildings?

Dr. LOGIE. The coldest day we have had since the first day of last October was one day when the committee was in session here, about ten days or two weeks ago. Do you remember a cold day that came along here?

Mr. HAY. Yes, I remember it.

Dr. LOGIE. That is the coldest day. Our temperature was lower that day, according to the official records, than it has been at any time since the first day of October.

Mr. HAY. Those are new buildings?

Dr. LOGIE. Those are new buildings.

Mr. HAY. And the heating apparatus is all right?

Dr. LOGIE. The heating apparatus is all right. The only trouble is that some fellow who does not understand the apparatus or the way the rooms are heated will sometimes open a transom, and it gets the system of ventilation all out of order. He does not know what is wrong with it, and it has to be explained to him that he must keep it shut; but if they keep the windows and doors shut there is no trouble.

Mr. SMYSER. Do you remember Mr. Brown, who was scalded?

Dr. LOGIE. Yes, sir.

Mr. SMYSER. How soon did you see him after the accident?

Dr. LOGIE. About thirteen hours. I saw him the first patient on the morning round, the following morning. He was scalded a little after 8 o'clock in the evening, sir.

Mr. SMYSER. Did he die from that scald?

Dr. LOGIE. No, sir.

Mr. SMYSER. Did it accelerate his death?

Dr. LOGIE. I do not think it did.

Mr. SMYSER. Is that an accident that may happen not only in that sort of an institution but anywhere?

Dr. LOGIE. Yes, but I have never known it. It never has happened in my personal experience before, but I have heard of it happening at other places. You see it was due to the thermostat getting out of order. It is a self-regulating heater of the standard make—the J. B. Clow make.

Mr. SMYSER. Do you know of anybody over there now, to your knowledge, who is not insane?

Dr. LOGIE. We have some men that are not insane, yes. They are recovering, and we are getting ready to send them home.

Mr. SMYSER. You are simply awaiting the proper time for their discharge?

Dr. LOGIE. We are simply awaiting the proper time for their discharge. We always keep them after they recover. We do not send them home the day the symptoms abate. We keep them for quite a while, until the convalescence, as we term it, is firmly established, and we feel sure that they are safe men, and then we send them home.

Mr. SMYSER. Do you know of anybody being committed there without due process of law?

Dr. LOGIE. No; nobody is ever committed there without due process of law, except, of course, by order of the Secretary of War, and he is permitted to send them there—and the Navy, and the Government, the soldiers' homes.

Mr. SMYSER. That is due process of law under the statute. He has that power.

Dr. LOGIE. They have that power; yes.

Mr. SMYSER. And you people out there can not help it?

Dr. LOGIE. We are compelled to send every man to court that comes over from the District of Columbia, provided he is not too sick to come. We are not supposed to take a man up out of bed, if he is ill, and send him down to the court, to the detriment of the patient. Some of those cases are the ones who complain most of not being committed——

Mr. SMYSER. I want the record to show this. In Ohio, when a charge of lunacy is made against a person, under the law that person must be brought before our probate judge; but if the patient is in such condition that he or she can not be brought to the probate court the probate judge drives into the country frequently fifteen or eighteen miles and sees the patient.

Dr. LOGIE. You might have that at St. Elizabeth's.

Mr. SMYSER. Over here, if the patient is in condition to be produced in court it is your duty and you do produce the patient. Is that it?

Dr. LOGIE. That is it, sir.

Mr. SMYSER. And the patient is not produced only when the patient is in such condition that he or she can not be produced?

Dr. LOGIE. That is right, sir.

The CHAIRMAN. Is there any desire on the part of any of you gentlemen connected with the hospital to keep patients after you think they are in condition to be sent away?

Dr. LOGIE. No, sir; we are anxious to make a record in sending as many away as is possible. It makes our department show up very much better if we can turn out a large number of recoveries.

The CHAIRMAN. That is so with the old soldiers as well as other people, is it not?

Dr. LOGIE. Oh, yes, sir.

The CHAIRMAN. When an old soldier whom you have received from a Home, for instance, has recovered, what happens to him? Do you send him back to the Home from which he came?

Dr. LOGIE. Sometimes he is sent to the Soldiers' Home. Sometimes he is ordered to another Home. Occasionally we discharge him, and let him go to his own home, or with relatives and friends. It depends on what that man wants to do.

The CHAIRMAN. What do you do with the patients who are indigent, who have no means of support, as far as you know, and no near friends who will care for them, provided they recover?

Dr. LOGIE. Well, now, that is a hard question. I do not know that I have ever had to test that condition, and if I had to do it I would not know just what to do with it. There are very few people there—I do not know of any—who have not some relatives or friends who will take care of them. Otherwise we would hesitate to discharge them. I would not like to see them go out and suffer hardships and privations and perhaps break down again, and I do not know just what we would do with a man like that. I remember a few years ago we did have a case like that. There was a man who had no means of support, and we permitted him to live at the hospital. He came down town and found work, and then we discharged him. That is the only case I remember of that kind.

The CHAIRMAN. Generally speaking, you find they are either old soldiers who have homes to go to, or else they have people who will care for them?

Dr. LOGIE. They have people, or relatives, who will care for them.

Mr. SMYSER. Along that line, Doctor, the suggestion has been made to me that you frequently get indigent insane from the District here, and when the time comes for the discharge by reason of recovery they have no friends and no possible means of support, and you continue to keep them out there. Has that sort of a story any foundation in fact?

Dr. LOGIE. Well, I don't know. I have not had anything of that kind to come up. We would not keep anybody that is well. At the same time, we—or at least I—would not discharge a man. I do not know what the others would do, but I would not discharge a man to go out upon the street with nothing. I would give him a home until he found something to do.

Mr. SMYSER. That is, you would allow him to remain in the institution, but not as a lunatic?

Dr. LOGIE. As a visitor. Yes; I would do that. I suppose that is against the law and that we are not permitted to do it, perhaps, but what are you going to do under the circumstances? I would not turn him out.

Mr. SMYSER. We have got some fellows down here in Congress that would, perhaps, turn them out. I do not know what I would do if I was put up to that position.

Mr. HAY. I do not think they would turn them out.

Mr. SMYSER. Well, you have got people, then, in the District of Columbia that would do that. You would keep them as a matter of humanity?

Dr. LOGIE. Absolutely. I would not turn a man out in the street without a home or friends or anything. I would not do it.

Mr. SMYSER. You know of only one instance, as you say, where that has happened?

Dr. LOGIE. That is all. I kept that man until he found something to do. He got something to do, and we turned him out then and let him go.

Mr. SMYSER. Did you think that in keeping him there and allowing him to remain in the institution you were committing a wrong act, and depriving him of his liberty, or did you think you were committing a humane act?

Dr. LOGIE. No man of that kind is deprived of his liberty at all. He is given full permission to go to town as often as he wants to and to stay as long as he wants to. The only thing is that he has to report to the hospital at night. They can not have those men coming to town and staying overnight, because we would not know where they were or anything about them. They must come back.

Mr. HAY. Do you know anything about Dr. Carraher?

Dr. LOGIE. Yes; I know Dr. Carraher very well. I know the patient.

Mr. HAY. Have you read the evidence about that?

Dr. LOGIE. Yes, sir; I have read the evidence.

Mr. HAY. Tell us about that, Doctor.

Dr. LOGIE. Might I read you a little piece from a book over there, a recent article on abuses among the insane?

Mr. HAY. Certainly.

The CHAIRMAN. We will be glad to have you read anything you care to.

Dr. LOGIE. Dr. Carraher's case corresponds very closely in many respects to this. This article is entitled——

Mr. SMYSER. What is that book, Doctor?

Dr. LOGIE. It is the New York Medical Journal, the leading medical publication of this country.

The CHAIRMAN. What is the date?

Dr. LOGIE. May 5, 1906. It is quite a recent thing. The article is headed "The causes of injuries among the insane," by Dr. J. T. W. Rowe, of the Manhattan State Hospital, Ward's Island, New York. Dr. Rowe says:

Periodically the public is treated to a startling and gruesome account of brutalities inflicted upon insane patients in State hospitals. One can only imagine the alarming effect such an account must have upon the hundreds of friends and relatives of our patients. Think of the anguish of the wife or mother whose husband or son has been sent there for treatment, the misery of the husband, when he pictures his wife torn from her little brood at home, perhaps suffering ill treatment at the hands of brutal nurses. The insistency of the charge of broken bones, due to rough handling or ignorance of attendants, of bodies of patients sent to their friends covered with bruises, would convey the impression that hospital attendants are capable of almost every crime in the calendar, and are a lot of unspeakably hardened wretches. These intemperate and sensational accounts of distorted facts, and imagination run riot, should be met by the strongest denial on the part of those whose position and authority entitle them to speak with certainty and full knowledge of the subject.

I know of none more eminently fitted to allay these alarming fears than the general medical practitioner. Coming in close touch, as he does, with the families and friends of patients under treatment in hospitals, and having had many of them at one time or another under his care, he can, from his knowledge of the episodes of excitement and depression inseparable from insanity, do a tremendous deal of good in allaying their fears and disseminating a rational view of the nature and outlook of cases of insanity, and the modern methods of care and treatment in State hospitals of the present day.

The class of cases which give rise to these eruptive newspaper notices are, most frequently, those of dementia paralytica, better known as paresis or softening of the brain. These,

from the day of their admission until their taking off, are a constant source of care and anxiety to the hospital staff. Alienists of experience are quite familiar with the trials and tribulations attending these cases, but the general practitioner knows little of them—the majority, indeed, have probably never seen a case in the last stage of mental and physical prostration.

The general paretic usually makes his début at the hospital in a defiant and turbulent mood, or with a glorious air of exaltation, and with the unmistakable intention of being a disturbing element. He comes not "unheralded and unsung," for he has probably wrecked his home, or, preferably, a restaurant, has received the usual amenities at the hands of the police, has been an unwilling ambulance case to Bellevue, and has undergone a temporary, but enforced, deprivation of his liberty and inclinations. This short but stormy experience has left upon him reminders in the shape of bruises and abrasions, so it is not surprising that his friends, on the occasion of their visit, scout our explanations and threaten to go to their newspaper or politicians.

From this time on his decline is rapid, varied by maniacal excitement, destructiveness, status epilepticus, and filthy habits; every time he strikes the wall or bed he sustains an injury; if he be given hydrotherapy, or local treatment, he resists and receives bruises on the arms and chest. He opposes every effort in his behalf, and if he slips on the floor he sustains an ecchymosis or fracture, according to the degree of circulatory disturbance and trophic changes, he is more or less afflicted with bed sores.

Then he cites some cases, etc., which it is not necessary to go into. Then he says:

I have seen nurses handle uncomplainingly cases in the very last stage of physical breakdown, wet, filthy, obscene, and befouling him in a disgusting manner; at another time controlling a paretic who in blind fury is bent upon self-destruction and everything else. He may be a burly longshoreman or a rounder from the Bowery, more accustomed to the clenched fist than the open palm. During a paretic furor the patient is a menace to himself and others, and being endowed for the time with the strength of two or three men, it calls for the greatest tact in controlling him and preventing injury. Their delusions of strength deprives them of judgment and fear, and they may make an unprovoked attack on the first patient or nurse they meet. The nurse must bear it all and look as patient as he can. Some have occupied much better positions in life, and like the apothecary their "poverty but not their will" consents to it. Take them all in all, they deserve a humble meed of praise.

In regard to this Carraher case, he is a paretic. This man has been with me since September of 1903. He was bruised when he came to the hospital. He had bruises, as well as I remember from the history, on his legs and arms. Since he has been in the hospital he has been quite restless. He gets up out of bed. He is suffering from the muscular weakness of paresis, and he falls against the door jamb, and sometimes he falls down on the floor. He is constantly going into the water-closet, and when he comes back he forgets where his bed is and he gets in some other man's bed who has gone to the water-closet. That man comes back and finds somebody in his bed, and there is a mix-up. Whenever you go to change this man's shirt—he very frequently soils himself—there is always a tussle. It takes two people to do it, and he resists absolutely everything you do for him. In addition to that he has filthy habits. He takes his feces up in his hands and rubs them all over his face and up into his hair.

I remember on one occasion one of the nurses went into his ward after having dressed himself in a white suit, complete, and this fellow took a handful of his feces and threw it over the nurse. It is an aggravated case. He has received one or two black eyes, and perhaps more. I do not remember her testimony very perfectly in regard to the black eyes. I investigated them at the time, although I do not remember the conclusion that was reached, except that in one case we found that a fellow patient by the name of Sam Hughes had inflicted that on him.

The CHAIRMAN. Mrs. Carraher said her husband was tied in bed.

Dr. LOGIE. Now, in regard to tying the patients, there is no patient absolutely that is ever tied, although Mrs. Washburn and Mrs. Carraher testified in regard to that tying. It consists in the restraint, so to speak, of a restless man. The bed which we use is about that broad, 3 feet 6 inches in width.

The CHAIRMAN. Two feet 6 inches.

Dr. LOGIE. Yes, 2 feet 6 inches; and it has iron sides, you understand. The nurse takes a sheet and folds it so that it is about twice that broad [indicating]. We will say it is twice that broad. It makes a good, big, broad band, and he tucks it neatly and snugly under one side, around that iron post, putting it first under the post this way [indicating] and tucking it up in here [indicating]. Then he goes on the other side, draws it fairly tight, and does exactly the same thing across the foot of the bed. He then does the same thing across the body. Of course, if you will look in this testimony, you will see that these people pull that loose, and for this cause the nurse has to go around to the restless patients dozens of times a day and tuck those patients in. Sometimes it is a little cold and a patient will not keep his clothing on, and he will not keep the bed clothing on. He will be continually getting up, and if he is weak he may fall and hurt himself, and we use that method of keeping them in bed. That is the tying you hear so much about. It has met with my approval. It is the invention of the nurse, though, pure and simple, and I think it is a mighty fine thing.

Mr. HAY. Is it in any way cruel, Doctor?

Dr. LOGIE. No at all.

Mr. HAY. How long is it kept on?

Dr. LOGIE. Well, I don't know about that. I have never paid any attention to it. It is such a harmless and inoffensive thing that I never paid any attention to it. I think about twenty minutes, though, before they get them out. It is not fastened in the slightest. It is merely tucked in.

The CHAIRMAN. Is there any such thing as cutting off the sugar and butter from patients by way of punishment?

Dr. LOGIE. Oh, no, sir; nothing is ever cut off, and no patient is ever punished or disciplined, except that we do lock a parole up sometimes if he runs away. We always do that; but that is the only discipline there. They are the only class of patients who are amenable to discipline.

Mr. SMYER. What is your experience over there as to bedsores?

Dr. LOGIE. We have bedsores sometimes; but the bedsores do not occur except in one class of patients, and those are the paretics. I can not help that. I can not keep them down. We have tried everything. Take that man Washburn there, and he has to-day three bedsores, and he has had them for some time. We dress them up every morning, and five minutes after we dress them the man has those dressings all ripped off, and he is scratching those things.

Mr. SMYER. Is an absence of bedsores generally an evidence of good treatment?

Dr. LOGIE. Oh, yes, sir; it is considered bad treatment to have bedsores in your service; but I can not help it in a paretic, sir, whether it is considered bad or not.

Mr. SMYER. Can it be helped?

Dr. LOGIE. I can not help it.

Mr. SMYSER. Can anybody help it?

Dr. LOGIE. No; nobody can help that. They will come. That is a pathological condition, so to speak, of the paretic—soft tissues.

The CHAIRMAN. Please do not fail to send us the book you spoke of.

Dr. LOGIE. Freidenwald's book?

The CHAIRMAN. Yes.

Dr. LOGIE. I will send you Freidenwald's book.

TESTIMONY OF JOHN A. CISCO.

JOHN A. CISCO, being duly sworn, was examined and testified as follows:

The CHAIRMAN. What is your full name?

Mr. CISCO. John A. Cisco.

The CHAIRMAN. Where do you reside?

Mr. CISCO. In Washington, at 515 Third street, NW.

The CHAIRMAN. How long have you lived here in Washington?

Mr. CISCO. Two years.

The CHAIRMAN. Are you in any way connected with the District government?

Mr. CISCO. I am in the employ of the Board of Charities, as an inspector.

The CHAIRMAN. The Board of Charities being one of the boards connected with the government of the District of Columbia?

Mr. CISCO. Yes, sir.

The CHAIRMAN. What are your duties as such inspector?

Mr. CISCO. I have charge of the insane work, that department of work especially looking after nonresident insane, and hunting up their locations, their friends and places of residence, and returning them home.

The CHAIRMAN. You mean when people are arrested here in the District of Columbia and appear to be insane, you start out investigating whether they are residents of the District or whether they live at some other place?

Mr. CISCO. After they have been committed to the Government Hospital, as insane; and also to investigate the ability of persons to pay—persons who are sometimes sent there as indigent patients, that we find to have property or who have friends who are willing to pay for them—and have them transferred from the indigent roll to the independent or pay roll.

The CHAIRMAN. Who are you appointed by—the District Commissioners?

Mr. CISCO. I am appointed by the Board of Charities.

The CHAIRMAN. Of whom does the Board of Charities consist? How many members are there, for instance?

Mr. CISCO. There are five members.

The CHAIRMAN. Who are they?

Mr. CISCO. John J. Edson is one; Mr. Woodward, of Woodward & Lothrop, is another, Mr. George W. Cook, Mr. Simon Wolf, and Dr. Charles P. Neill.

The CHAIRMAN. Do your duties take you over to St. Elizabeth's Asylum?

Mr. CISCO. Frequently, from one to three times a week.

The CHAIRMAN. What do you do over there?

Mr. CISCO. I first visit the physician in charge of any particular patient whose case I am investigating, and I ascertain from the physician the condition of the patient and as much of the history as they have obtained and then I visit the patient and obtain from the patient what information I can as to his family and friends and his residence.

The CHAIRMAN. When you go over there you just visit the particular patient you are investigating at that particular time, I suppose, do you not?

Mr. CISCO. Yes, sir; but frequently I have four or five that I interview at the one visit.

The CHAIRMAN. They sometimes may be in different wards, I suppose?

Mr. CISCO. They are, yes, sir.

The CHAIRMAN. In that way you have a general knowledge of affairs throughout the entire institution, have you not?

Mr. CISCO. I am over there frequently, and I spend half a day and sometimes almost the entire day over there and I am in several wards while there and I see quite a good deal of what is going on.

The CHAIRMAN. From what you have observed there what do you think generally of the institution as to the care of patients?

Mr. CISCO. My impressions have been all along that the care of the patients over there is excellent in every way. I have seen nothing to indicate to the contrary.

The CHAIRMAN. Have you ever seen anything like undue harshness in the care of patients?

Mr. CISCO. No, sir.

The CHAIRMAN. In restraining them?

Mr. CISCO. I go there without any warning, and since I have become acquainted there I go to any of the wards where I wish to see a patient, knock on the door, and am admitted by the attendant, and walk in. I see more of the patients in the wards than anywhere else. Very few of them are brought out to the reception rooms. I go back in the wards frequently.

The CHAIRMAN. If you have one patient to see you go to the particular ward where he is confined, and consequently you see all of the patients in that ward?

Mr. CISCO. Yes, sir, and I have abundant opportunity to talk with the patients, especially those I go to see.

The CHAIRMAN. Did you ever see anything like a serious disturbance over there among the patients?

Mr. CISCO. I never have.

Mr. HAY. Did they ever complain to you, any of them?

Mr. CISCO. Only of their confinement. I think I can state that universally the statements of the patients to me over there and on their way home, as I have traveled with them, have been that they have been well treated and kindly treated in every way. Their only complaint has been as to their confinement, their being declared insane and placed in an insane asylum. Their condition is always improved. I do not recall a patient out of a total of about 120 in the two years that I have taken and sent them home but that between the time I have first visited them to get information and the time they have been discharged has not shown a marked improvement.

Mr. HAY. Did any of them ever complain to you of the food?

Mr. CISCO. None of them.

Mr. HAY. Or make any complaint except what you have indicated?

Mr. CISCO. Nothing at all. That is the only impression that I have.

Mr. HAY. Did you take this man Marshall to Boston?

Mr. CISCO. No, sir; Professor Cook of the board took Mr. Marshall to Boston. I investigated the case and was in communication with his brother and several times with him. He had a good many complaints to make, but it was altogether, as I recall, against the Government as to prosecutions.

Mr. HAY. There was no complaint against the care and attention he received at the hospital?

Mr. CISCO. I think not. I do not think Mr. Marshall ever complained to me of the care and treatment. I know he spoke very highly of Dr. Stack and others who had him specially in charge. He did not want to leave there except in his own way.

Mr. HAY. He complained of the United States generally?

Mr. CISCO. Yes, a great deal, and he would not leave there, and he is a man without a residence. He was born in Canada, but he has been in this country for several years, moving about from place to place. He has been in other asylums, and he has no residence that I could fix; but his brother was willing, if he would come to Boston, to look after him. It was nearly a year before he was willing to go to Boston, and when he was willing we sent him.

The CHAIRMAN. Do you know what other asylums he was in, Mr. Cisco?

Mr. CISCO. He was in an asylum in Boston, and I think one in Maine. I am not sure about that.

Mr. HAY. Have you anything else to say as to the way the affairs of that hospital are conducted?

Mr. CISCO. I think I have covered the ground in stating the facts of my frequent visits over there and the time I spend there, my free access to all parts of the institution, wherever I wish to see patients at any hour in the day, the number of patients that I have come in contact with in two years—several hundred of them—the 120 that I have sent and taken away, besides numerous others that I have talked with. I must say that there is not anything that has come to my knowledge but that speaks in the highest terms of the treatment of the patients and their affairs over there.

The CHAIRMAN. The Ohio member of this committee is extremely anxious to know whether you originally came from Ohio?

Mr. CISCO. I was born and raised in Ohio, in Green County.

Mr. SMYSER. Green County?

Mr. CISCO. Yes, sir.

The CHAIRMAN. Is that one of yours?

Mr. SMYSER. No, sir.

Mr. HAY. That is one of the good ones.

Mr. CISCO. They are all Republicans there.

Mr. HAY. That is what I supposed.

TESTIMONY OF DR. W. H. HOUGH.

Dr. W. H. HOUGH, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. Dr. Hough, how old are you?

Dr. HOUGH. Twenty-eight years.

The CHAIRMAN. Where did you study medicine?

Dr. HOUGH. At Georgetown University.

The CHAIRMAN. Did you graduate there?

Dr. HOUGH. Yes, sir.

The CHAIRMAN. Are you connected with St. Elizabeth's?

Dr. HOUGH. Yes, sir.

The CHAIRMAN. How long have you been there?

Dr. HOUGH. Since June 10, 1904.

The CHAIRMAN. Did you take a competitive examination?

Dr. HOUGH. Yes, sir; I did.

The CHAIRMAN. And you received your appointment from the Civil Service Commission?

Dr. HOUGH. From the Civil Service Commission.

The CHAIRMAN. What ward are you connected with?

Dr. HOUGH. I am junior assistant physician on the female service.

The CHAIRMAN. What have you to say generally regarding the care and treatment of patients who are under your charge?

Dr. HOUGH. I do not see that it could be improved upon, sir. It is the very best.

The CHAIRMAN. How many wards are there in your department?

Dr. HOUGH. In the entire female department we have 11 buildings. It is my duty to look after a portion of that group of buildings, which comprises 6 of the buildings, constituting the 11 wards.

The CHAIRMAN. How many patients altogether are there in the wards?

Dr. HOUGH. In the entire female service there are 643.

The CHAIRMAN. I mean that come particularly under you?

Dr. HOUGH. About 300.

The CHAIRMAN. Who is your superior?

Dr. HOUGH. My superior officer is Dr. O'Malley.

The CHAIRMAN. Did you know a patient there by the name of Mrs. Lochte?

Dr. HOUGH. Mrs. Lochte?

The CHAIRMAN. Yes.

Dr. HOUGH. Yes, sir.

The CHAIRMAN. Tell me about her case, will you?

Dr. HOUGH. Mrs. Lochte was admitted there about June, 1905, and on admission she was a very much disturbed case. She was very apprehensive and very hard to manage for the first few days after her admission. She did, however, soon quiet down, and was able to be managed more readily. She required a great deal of care and delicate handling for a while, because of her apprehensiveness. She would resist everything being done for her, and would imagine that she was going to be done some bodily harm; but I think she was always handled gently, and never to my knowledge has she received any ill treatment at the hands of any of the attendants.

The CHAIRMAN. Mrs. Lochte had puerperal insanity, did she not?

Dr. HOUGH. Mrs. Lochte's case, mentally, was one of acute mania.

Mr. HAY. Puerperal insanity?

Dr. HOUGH. That probably entered into it to a large extent.

The CHAIRMAN. Did she resist the nurses when she was being clothed and bathed, you mean.

Dr. HOUGH. Yes, sir; she did, for a short while. For the first few days she was very hard to manage, and then she quieted down, but she had one other attack before she was discharged, I think. She had one or two other attacks in which she became very much disturbed and very violent.

The CHAIRMAN. She was there for only a month, was she not.

Dr. HOUGH. No, sir.

The CHAIRMAN. How long was she there?

Dr. HOUGH. I think she was there from about June until September. I think you refer to another case.

The CHAIRMAN. What do you know about the case of Mrs. Sadie Wright?

Dr. HOUGH. Mrs. Sadie Wright was a case of insanity following an operation, with an ex-ophthalmic goitre. She was admitted about March, 1904. She was in very bad condition both physically and mentally.

The CHAIRMAN. Was she an elderly woman?

Dr. HOUGH. I think she was about 50 years of age. She remained in the hospital I think about a week or ten days and died from exhaustion, from her weak condition physically, and she was very much disturbed mentally. She was put to bed the second day, I think, after her admission, and her heart was in very bad condition. She was very apprehensive and disturbed, and would throw herself about from one side of the bed to the other, and at times she refused nourishment and refused medicine, or anything being done for her at all. On account of the extremely serious condition of her heart it was hesitated to tube-feed her, but we tried to nourish her through the rectum. Finally we did give her, I think, one or two feedings by the stomach tube. She finally grew weaker and weaker, and died from exhaustion. Her weak heart was probably the most important factor in bringing about her death.

The CHAIRMAN. Everything was done for her that could have been done?

Dr. HOUGH. Everything was done for her. She was treated very carefully, and got the best attention. She was seen every day five or six times by one of the physicians.

The CHAIRMAN. What do you know about Mrs. Lottie Wright?

Dr. HOUGH. Mrs. Lottie Wright was a patient who was admitted in November, 1904—1905. That is a case of puerperal insanity. Her case was somewhat similar, from a medical standpoint, to that of Mrs. Sadie Wright. That is a case of exhaustion from childbirth. This patient was apprehensive, as was the old lady, and very hard to treat on account of her physical condition. She had recently given birth to a child, and that had caused laceration of the perineum, and the patient was really treated more like a baby than an adult. She was handled very carefully, and at times it was necessary to use the restraining sheet.

The CHAIRMAN. Her legs were bound together, as a consequence of the operation that had taken place consequent upon childbirth?

Dr. HOUGH. That is the reason. They were bound together to keep her from tearing apart. She was very much confused, and did not know where she was or anything about her. When she was allowed to get up she would wander about the room. She was occasionally allowed to go out in the hall, and she would wander about aimlessly among the patients, and it was deemed advisable to keep her in the room the greater part of the time, and part of the time we had to use the restraining sheet.

The CHAIRMAN. Do you think anything could have been done to ameliorate her condition that was not done?

Dr. HOUGH. Absolutely nothing. She received the best medical attention from Dr. Clark, who had her in charge.

The CHAIRMAN. She was discharged entirely cured?

Dr. HOUGH. Yes. She was only in the hospital one month, I think; yes, exactly one month. It is a form of insanity that usually does improve.

The CHAIRMAN. Some of the patients under your care have performed work in the laundry, have they not?

Dr. HOUGH. Yes, sir.

The CHAIRMAN. How many of them worked there?

Dr. HOUGH. We have an average of about 13 to 16 daily, colored female patients, working in the laundry.

The CHAIRMAN. Is it a good thing or a bad thing for a patient to have some occupation?

Dr. HOUGH. I think it is a very good thing. A great many of them seem to like it down there, and I have frequently had them ask to go down. I had one only last week ask me if she could go down to the laundry to work. They seem to get along very well down there, and they seem to enjoy it, every one of them. I see them occasionally at work, and they seem to be getting along well, and to be very much pleased.

The CHAIRMAN. Did you ever hear any complaint from any of them about unpleasant treatment down there?

Dr. HOUGH. Not a single complaint, sir; only if we could supply more ironing boards than we have there—if we had them—because frequently on the colored wards they ask to go to the laundry to work, but on account of the boards all being filled we can not give them all work.

The CHAIRMAN. And that, you think, is entirely beneficial?

Dr. HOUGH. I think so.

Mr. HAY. How many wards have you?

Dr. HOUGH. Eleven.

Mr. HAY. And how many attendants?

Dr. HOUGH. The attendants are nearly evenly divided. I do not remember just exactly how many are on the wards I have, but there are about eighty-three in the entire department for 643 patients.

Mr. HAY. How are they divided up, do you know?

Dr. HOUGH. They are divided up according to the class of patients.

Mr. HAY. How many hospital wards have you—and by that I mean where people are sick in bed.

Dr. HOUGH. They have four hospital wards in that portion of the department that I look after daily.

Mr. HAY. How many attendants are there on each one of those wards?

Dr. HOUGH. On one of the wards I have a chronic class of white women, and we have there four nurses in the daytime and two at night. On another ward, a small ward, of only about 15 or 20 patients, we have two nurses in the daytime and one at night. On the acute receiving ward for colored females we have two nurses on one ward of 11 patients, and on another small acute ward we have one day nurse and one night nurse. Then we have another large ward of colored females with four day attendants and one at night, and another cottage with three day attendants and one night attendant, and another cottage with about the same class of patients and the same number of nurses.

Mr. HAY. Do you think you have sufficient attendants?

Dr. HOUGH. I think when we have our full quota we have sufficient attendants on the female service.

Mr. HAY. You have a full quota now?

Dr. HOUGH. I think we have about two vacancies.

Mr. HAY. Do these vacancies occur all the time?

Dr. HOUGH. There are very frequently one or more vacancies on the female service in attendants. They are leaving and going away on private cases, etc.

Mr. HAY. And you do not think that for the care of patients it is necessary to have any more attendants than you have?

Dr. HOUGH. I can not see that it would be markedly benefited by it.

Mr. HAY. Would it be benefited at all by it?

Dr. HOUGH. I doubt very much if it would.

Mr. HAY. If you had more attendants could you not give the patients more care and look after them better?

Dr. HOUGH. Perhaps they would get a little more care, but I can not see that any of them are neglected, sir, in a single instance. If they were neglected I think we would have more attendants, or get a few more at least.

Mr. HAY. Have you any patients there who pay for their maintenance, for their care, etc.?

Dr. HOUGH. I think so, but that does not come under my duties at all, to look after that portion of it; but I believe there are a few.

Mr. HAY. Do you know whether those patients have attendants of their own, or whether they are looked after by the attendants of the hospital?

Dr. HOUGH. They are looked after by the attendants of the hospital.

Mr. HAY. They are?

Dr. HOUGH. Yes, sir.

Mr. BARCHFELD. The previous doctor who was on the stand testified as to these Sunday morning gatherings of resident physicians.

Dr. HOUGH. Yes, sir.

Mr. BARCHFELD. Do you attend those?

Dr. HOUGH. Yes, sir; every one of them.

Mr. BARCHFELD. Does the entire resident staff attend those meetings?

Dr. HOUGH. Yes, sir.

Mr. BARCHFELD. Eleven men?

Dr. HOUGH. Eleven men; yes, sir; every one.

Mr. BARCHFELD. Does Dr. White attend?

Dr. HOUGH. Yes, sir; he is chairman of this meeting.

Mr. BARCHFELD. How long do you generally sit?

Dr. HOUGH. From 11 to 12, or rarely until quarter past.

Mr. BARCHFELD. Do you find it beneficial?

Dr. HOUGH. Very much so.

Mr. BARCHFELD. Do you find it pleasant and congenial?

Dr. HOUGH. Yes, sir; it is very agreeable, and I think it of great advantage to the hospital staff to keep them abreast of the times.

Mr. BARCHFELD. Do you discuss cases that come before you?

Dr. HOUGH. Yes, sir; we discuss cases on the wards, and particularly acute cases and recent admissions, and we keep up with the journals.

Mr. BARCHFELD. And occasionally some member reads a paper?

Dr. HOUGH. Yes, sir.

TESTIMONY OF MRS. ANNA HARMON.

Mrs. ANNA HARMON, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Do you reside in the city of Washington?

Mrs. HARMON. Yes, sir.

The CHAIRMAN. You have frequently visited St. Elizabeth hospital?

Mrs. HARMON. For the past fifteen years I have been visiting it.

The CHAIRMAN. Have you frequently visited it since October, 1903?

Mrs. HARMON. Yes, sir.

The CHAIRMAN. You go there to see a daughter?

Mrs. HARMON. I have a daughter there.

Mr. SMYSER. How frequently do you go over?

Mrs. HARMON. How frequently?

Mr. SMYSER. Yes.

Mrs. HARMON. On an average of once in two weeks, and sometimes oftener. My daughter has epilepsy so that I do not have to go there as frequently as I otherwise would.

The CHAIRMAN. Have you a sister there?

Mrs. HARMON. Yes, sir; I have a sister there.

The CHAIRMAN. Has your sister been there during the whole period of fifteen years?

Mrs. HARMON. No, sir; she has been there a shorter period, perhaps nine years.

The CHAIRMAN. Your daughter has been there the entire time?

Mrs. HARMON. Yes, sir; the fifteen years. She has had epilepsy since she was a child.

The CHAIRMAN. From your visits there are you satisfied with the treatment accorded to your sister and daughter?

Mrs. HARMON. Yes, sir; I am perfectly satisfied with the treatment, so far as I know.

The CHAIRMAN. So far as you know they receive proper care and attendance?

Mrs. HARMON. Yes, sir; my daughter and sister receive excellent care.

The CHAIRMAN. Are they in a condition so that they can talk to you?

Mrs. HARMON. Yes, both of them.

The CHAIRMAN. Your daughter, except when these violent attacks come on, of epilepsy, can converse with you on almost any subject?

Mrs. HARMON. She can converse perfectly well, except at those times.

The CHAIRMAN. She unquestionably would tell you of any complaint she had, would she not?

Mrs. HARMON. Yes, of course; like the others, she would like to come home.

The CHAIRMAN. Naturally.

Mrs. HARMON. Yes; that is very natural.

The CHAIRMAN. I mean she has never complained to you of any improper care or lack of care on the part of either the nurses or other attendants?

Mrs. HARMON. No; the only thing is she is an epicure in taste. Her father was an epicure. She likes to have very good things to eat, so I frequently take her things myself; but I think the food is of a plain clean nature.

The CHAIRMAN. You have seen the food, I suppose?

Mrs. HARMON. Yes; I have been there at the meals.

The CHAIRMAN. She naturally likes better things than she can get in any institution I suppose?

Mrs. HARMON. Yes; certainly.

Mr. HAY. Did she ever complain to you or say to you or make any statements to you of any other patient having been cruelly treated?

Mrs. HARMON. No, sir; she has not. Of course where she is the patients frequently fall in those attacks, and I have been there myself and seen them fall. The nurses certainly have taken care of them well, and as I say I have been in at all hours of the day and of the evening; and as to neatness, I think they are scrupulously neat over there. They bathe the patients frequently. Of course any ill-treatment I do not know anything about. Of course I am only speaking for myself.

Mr. HAY. Are the epileptics separated from the others?

Mrs. HARMON. They are in a ward by themselves.

Mr. HAY. Do you think they are sufficiently separated?

Mrs. HARMON. They are all by themselves. There are no others with them. They are all epileptics.

The CHAIRMAN. About how many of them are there in the ward where your daughter is?

Mrs. HARMON. That is what I don't know, because they are frequently changing.

The CHAIRMAN. I mean how many beds? There are how many places?

Mrs. HARMON. My daughter has a separate room, and then there is a long dormitory where there are others. There are quite a number of separate rooms. She has a separate room. She likes to have a little room to herself. I don't know how many there are.

The CHAIRMAN. It is not really a matter of any great moment?

Mrs. HARMON. I could hardly tell, because I do not see them all together. I should think there are two or three dozen patients there.

The CHAIRMAN. Is your daughter's health such that she can frequently go out and take walks around?

Mrs. HARMON. Yes; I take her out every time I go over, to walk, but I can not have her at home. I have tried several times to take her home, but I can not keep her at home.

Mr. SMYSER. Do you feel that she is better cared for there?

Mrs. HARMON. Yes, sir; and I am thankful for such a place. I can not keep her at home. I have tried several times. I have had her in special institutions, endeavoring to have her cured, but I have had to bring her back to St. Elizabeth's.

The CHAIRMAN. You find that she is better off in St. Elizabeth's than she is in these institutions?

Mrs. HARMON. Yes; I would like to take her home, and it is a great trial to me not to have her home, and it is something that I have a demonstration over every time I go there, but I go of course. I have never seen the slightest ill treatment. Of course that is my own testimony. What others have seen I don't know.

The CHAIRMAN. But you have no doubt that if there was any cause for complaint on the part of your daughter that her mind is in such condition that she would tell you about it?

Mrs. HARMON. Of course.

The CHAIRMAN. She talks to you about things that happen there when you are there?

Mrs. HARMON. Yes; and my sister has been home with me quite a while. She has a little stay and then she goes back.

The CHAIRMAN. Has your sister epilepsy, too?

Mrs. HARMON. No; she does not have that. I don't know what you call it.

Mr. SMYSER. Melancholia?

Mrs. HARMON. No; it is not that, either. She has certain notions and ideas that can not be carried out.

Mr. SMYSER. Delusions?

Mrs. HARMON. Delusions; I guess that is the word.

Mr. SMYSER. If such things were being done over there as we have been hearing about here for some time, would you have confidence in your daughter that if she witnessed these things she would tell you?

Mrs. HARMON. I think she would, sir. I do not see why she would hesitate to.

Mr. HAY. Is your sister in the same ward with your daughter?

Mrs. HARMON. No, sir; my sister is in the best ward in the institution, and it certainly is fine there. The food is good and the attention is good. My sister has the privilege of the grounds; she has what they call a parole; but she is not allowed to leave the institution?

Mr. HAY. To leave the grounds, you mean?

Mrs. HARMON. She is not allowed to leave the grounds. I have also been there to dinner. Of course the food is better than at the other.

The CHAIRMAN. What ward is your sister in?

Mrs. HARMON. The L Building.

Mr. SMYSER. Is your sister well treated?

Mrs. HARMON. She is well treated. Of course, like the others, she wants to come home. It is very natural for them to want to come home. She is well treated also. That is my experience with St. Elizabeth's.

Mr. HAY. What is your sister's name?

Mrs. HARMON. Her name is Mrs. Rose Wheeler.

The committee (at 12 o'clock m.) took a recess until 2 o'clock p. m.

AFTER RECESS.

The committee reassembled at the expiration of the recess.

TESTIMONY OF DR. WILLIAM F. R. PHILLIPS.

Dr. WILLIAM F. R. PHILLIPS, being first duly sworn, was examined and testified as follows:

The CHAIRMAN: Doctor, you are the dean of the George Washington University, are you not?

Dr. PHILLIPS. Of the medical department; yes, sir.

The CHAIRMAN. Do you know the medical staff of St. Elizabeth's Hospital?

Dr. PHILLIPS. I know some of them. I can not say that I know them all.

The CHAIRMAN. Do you know Dr. White and Dr. Stack?

Dr. PHILLIPS. I have never met Dr. Stack. He is probably the one I have not met. I know Dr. White quite well, Dr. Blackburn, Dr. Hough, Dr. Fitch. I know them quite well, and may be others I do not know.

The CHAIRMAN. What is the professional status of the gentlemen on the medical staff of St. Elizabeth's Hospital, whom you know?

Dr. PHILLIPS. It is excellent, sir. We think so well of them that we have elected them professors in our faculty; that is, Drs. White, Clark, and Blackburn, and we would be very glad, I think, to get more of them if we had room for them.

The CHAIRMAN. Do they deliver lectures?

Dr. PHILLIPS. They deliver lectures and give instructions to our students. The students go to St. Elizabeth's in order to see cases.

The CHAIRMAN. Do they go at regular times?

Dr. PHILLIPS. Heretofore they have gone there Saturday evening, and they go for about fifteen weeks, as well as my recollection serves me.

The CHAIRMAN. Do they also send for students in your hospital when operations are to be performed?

Dr. PHILLIPS. No; we have never sent students when operations are to be performed, as it would be too far for them to go. We have other clinical facilities.

The CHAIRMAN. Do the students you send there have an opportunity to see the patients?

Dr. PHILLIPS. I can only speak from hearsay, as I have never been present at any of the clinics; but I understand from the students that they are shown one or two selected cases which illustrate the type of nervous or mental disease the professor is lecturing to them upon and which they are studying. Those are, of course, always selected cases.

The CHAIRMAN. Do you go over to the hospital yourself?

Dr. PHILLIPS. I have been over there once.

The CHAIRMAN. How long ago was that?

Dr. PHILLIPS. It was just about two years ago. I went over there for the specific purpose of seeing how the hospital was run, because I am interested in that subject, having charge of the university hospital. I wanted to see how a hospital should be run, and I went there for that

specific purpose. I went through the hospital very thoroughly, within the limited time at my disposal, and devoted a half a day to it.

The CHAIRMAN. What do you think, generally, with regard to the conduct of that hospital, as a hospital for the insane?

Dr. PHILLIPS. You speak of hospitals for the insane. Of course I know nothing about them; but I speak from the point of view of a general hospital. From that point of view it impressed me as excellent. I have never been in a hospital that impressed me more favorably than that.

The CHAIRMAN. You have visited a great many hospitals?

Dr. PHILLIPS. I have visited hospitals from the Atlantic to the Pacific.

The CHAIRMAN. Have you visited many insane hospitals?

Dr. PHILLIPS. I never had been in an insane hospital before going into St. Elizabeth's. I have been interested here in general hospitals, from a medical and educational point of view, and the use of hospitals for educational purposes. I can not say how St. Elizabeth's compares with other insane hospitals; but looking at it from the standpoint of a general hospital, it certainly impressed me most favorably.

The CHAIRMAN. From your reading and conversation with other people, how does the general reputation of the Government Hospital for the Insane compare with the reputation of other like hospitals?

Dr. PHILLIPS. It has always stood well. I have always heard it mentioned as being probably one of the best insane hospitals in the country.

TESTIMONY OF MRS. JENNIE H. COLE.

Mrs. JENNIE H. COLE, being first duly sworn, was examined and testified as follows:

The CHAIRMAN. Do you reside in the city of Washington?

Mrs. COLE. No, sir; I reside in Richmond, Va.

The CHAIRMAN. Have you had occasion to visit St. Elizabeth's Hospital?

Mrs. COLE. For the last two years, until about a month ago, every day.

The CHAIRMAN. Did you have some one there in whom you were interested?

Mrs. COLE. I have a mother over there. I am a sister of Nannie H. Griffin, who testified here before.

The CHAIRMAN. You are a daughter of Mrs. Griffin?

Mrs. COLE. Yes, sir.

The CHAIRMAN. You say you have been in the habit of going there?

Mrs. COLE. Every day, for 365 days in the year, for two years.

The CHAIRMAN. What have you seen in the hospital in regard to the treatment of Mrs. Griffin, your mother?

Mrs. COLE. Well, my mother has been in St. Elizabeth's ever since the 14th of April, 1905. She was committed there by my two brothers. My sister and I did not put her there, but my brothers put her there. Sister and I have been going there every day since she has been put there. We went there the second day after she was put there and we went in to see her and we found her with just a night dress on and the window hoisted, when she had nothing on but this night dress. She was in very delicate health; in fact, they had told us that she was a tubercular patient, and that she ought not to be exposed. There were three physicians who attended my mother.

and each one of them advised us to put her there, saying that she would receive the best attention that could be given her in the United States.

The CHAIRMAN. What are the names of those physicians?

Mrs. COLE. Dr. George Warren.

The CHAIRMAN. Where did he live?

Mrs. COLE. At 1212 H street NE. One of the others was Dr. Millard F. Thompson. I don't know the number of his house, but it is on Maryland avenue, SW. The other one was Dr. Preston, of Baltimore. I don't know his address; but I presume you know him.

The CHAIRMAN. They advised you to put your mother in St. Elizabeth's?

Mrs. COLE. Yes; they said that was the place to put her, and that she would get the very best attention there, and that if there was any possible chance of her coming back to us she would get it there. We put her over there to be brought back to us.

The CHAIRMAN. You say that your brothers had her committed there?

Mrs. COLE. Yes, sir; her two daughters did not do it. It was not our desire.

The CHAIRMAN. You say that notwithstanding the advice of these three physicians, do you?

Mrs. COLE. We still did not want her to go there. I wanted to go to a suburban place and to put her in it.

The CHAIRMAN. Have you ever made any attempts to get your mother out of the hospital?

Mrs. COLE. No, for the simple reason that Dr. Clark thought it was better for my mother to stay there and that there was a possible chance that her mind might be fully restored. She was an acute case, and he said that my mother would never go into a demented condition and that there was always a possible chance of her recovering her mind. She was not insane, but just an acute patient and would never become demented. He has told me that time after time. I saw my mother one day after she was committed and I did not see her again for three weeks, and during that period my mother had three ribs fractured and her face was swollen in such a condition that Dr. Clark told me it was an abscess and something that was contagious, and that, in fact, one or two of the patients in the hospital had had it.

Whether they were in her ward or not I do not know; but they were in the hospital, and my mother had the same thing that some one else had had. For three weeks we were not permitted to see her. After three weeks Dr. Clark told us that my mother had fractured her rib. I told him that I insisted upon going in to see her. I think Dr. Clark first stated that he was very anxious to acquaint us with the fact that my mother's ribs were broken. I must say that we were not acquainted with that fact until we personally went into Clark's office and he told us in his office. We had not found out that my mother's ribs were fractured. He may have told my brother, but my brother didn't tell me; and I didn't know it until I personally saw Dr. Clark and he told me.

The CHAIRMAN. Your brothers had your mother committed?

Mrs. COLE. My brothers did; yes, sir.

The CHAIRMAN. Would it not be natural for the doctor to communicate with the people who had her committed?

Mrs. COLE. Not when he had seen the two daughters there every day for three weeks. Although we could not see our mother, we went there every day for three weeks.

The CHAIRMAN. Did Doctor Clark know your address?

Mrs. COLE. Yes, sir; our telephone number, our address, and everything.

The CHAIRMAN. You had given it to him?

Mrs. COLE. Yes, sir; in black and white, and I had impressed it upon his mind.

The CHAIRMAN. Doctor Clark stated to us the other day that your brother had expressed himself as being entirely satisfied with the treatment your mother had received in the hospital.

Mrs. COLE. Well, if you will permit me to say so, my sister and I had full charge of our mother when she had a very severe spell of illness before she went into St. Elizabeth's, and my brother only saw my mother for five minutes at a time.

The CHAIRMAN. Are you on friendly terms with your brother now?

Mrs. COLE. Perfectly so; with all three of them. I have three brothers, and I am perfectly friendly with them. I only want to stand in the right light of justice to my mother.

The CHAIRMAN. You think your brothers made an error of judgment when they insisted upon having your mother go to the hospital?

Mrs. COLE. I think so; yes, sir. I think so now at this standpoint, when so many things have happened to her during the last two years. I now stand in the light that it was wrong for my mother to go there after she has received the severe injuries she has received during those two years. In fact, I have told Dr. White that I didn't put my mother there to get killed or injured, but I put her there so that she might be restored to us.

The CHAIRMAN. Is your mother in as good condition as she was when she went into the hospital?

Mrs. COLE. I think this investigation has come too late to do my mother any good; but it may do good to the mother of somebody else. I think it is too late for mamma.

The CHAIRMAN. Do you desire your mother to be taken from the hospital now?

Mrs. COLE. I desire my mother to be taken from the hospital if my brother will consent to have her taken to his home.

Mr. SMYSER. Let us meet this question squarely. Your mother is in the hospital?

Mrs. COLE. She is.

Mr. SMYSER. You think she ought not to be there, don't you?

Mrs. COLE. Well, I think my mother is in such a condition since——

Mr. SMYSER. I am not asking you anything about her condition. You think she ought not to be there, don't you?

Mrs. COLE. I think she ought to be there now, since they have permitted her to fracture her leg.

Mr. SMYSER. Have you thought at any time since her commitment that she ought not to be there?

Mrs. COLE. Yes, sir; I have.

Mr. SMYSER. What steps, if any, have you taken to have her taken from the hospital?

Mrs. COLE. I have asked Dr. Clark at various times if my mother was in a condition to be taken from the hospital, and he said that if

he was in my place he would not take her away, but would wait until she was in a good condition to leave.

Mr. SMYSER. And notwithstanding you have felt that she ought to be taken away from there, what steps have you taken to get her away?

Mrs. COLE. I did not consider that it was necessary for me to take any steps, when I was standing in the light of thinking that perhaps the hospital might do my mother some good.

Mr. SMYSER. Then you don't want to take her away from there?

Mrs. COLE. I love my mother so that I don't want to be the one to stand in the light of her being restored again to me.

Mr. SMYSER. Did you think she could be restored there?

Mrs. COLE. I thought she could be restored there, because I had had the advice of three such competent physicians that she could be.

Mr. SMYSER. You had their advice that she might be restored?

Mrs. COLE. Yes.

The CHAIRMAN. Have you ever consulted with these physicians about it?

Mrs. COLE. I have.

The CHAIRMAN. What do they say now?

Mrs. COLE. They all say that it was better for her to be there. I have seen them recently, and know what their opinion is now.

The CHAIRMAN. Have you any complaint to make about Dr. Clark notifying your brother, who was responsible for your mother's commitment there, of this accident? Did he not fulfill his duty when he notified him immediately?

Mrs. COLE. I thought that when a person happened to an accident that the entire family was notified.

The CHAIRMAN. He notified one member of the family?

Mrs. COLE. Well, we live in different places; and I thought that when a person was ill at a hospital if anything happened to them it was considered that they should notify the whole family.

Mr. SMYSER. You would not be so unreasonable as that, would you?

Mrs. COLE. I should think so.

Mr. SMYSER. To illustrate: Suppose your mother had six children living here in the city of Washington, and she was taken to the hospital and an injury occurred to her there——

Mrs. COLE. No, sir; she only has three.

Mr. SMYSER. I know that; but I am giving an illustration. Would it be your idea of duty that the hospital should immediately notify each one of those six children of the fact that an accident had befallen their mother?

Mrs. COLE. I think so, sir, when the two daughters visit their mother every day and that physician sees that those daughters come there every day and sees their love for that mother. I think that physician should, from courtesy, if nothing else, notify those two daughters what their mother's condition is.

Mr. SMYSER. You do not mean to say there is any want of affection on the part of your brother toward your mother, do you?

Mrs. COLE. I feel that when a son is married the same warmth of love and affection does not exist in him as does exist in the breast of a girl toward her mother.

Mr. SMYSER. The hospital record discloses something with which perhaps you are not familiar. Your mother was committed there on

the 14th of April, and the record shows that she was in such a condition that an examination of her could not be made immediately. An examination of her was made on the 18th day of April, by two doctors, and that examination disclosed the fact that there were fractured ribs. You perhaps did not know that.

Mrs. COLE. I was fully aware and know positively that my mother did not have fractured ribs before she entered the gates of St. Elizabeth's Hospital.

Mr. SMYSER. You and your sister had tried to take care of your mother?

Mrs. COLE. My sister and a colored woman and myself.

Mr. SMYSER. And she was very much excited, was she not?

Mrs. COLE. She was excited during the last week, but not enough so that we could not take care of her.

Mr. SMYSER. She was up and around?

Mrs. COLE. She walked around just the same as she walked up until the time her leg was fractured.

Mr. SMYSER. That was sometime afterwards?

Mrs. COLE. Her condition remained the same.

Mr. SMYSER. Did she have a fractured leg before she was taken to the hospital?

Mrs. COLE. No, sir.

Mr. SMYSER. That is what I want to get at. Take the week before she was committed to the hospital; how much of the time was your mother in bed at your house?

Mrs. COLE. My mother was not in bed for two weeks before she left home.

Mr. SMYSER. Where was she?

Mrs. COLE. She was walking continuously, and my sister and the colored woman and myself were right with her.

Mr. SMYSER. You do not mean to tell us that your mother was walking continuously for two weeks?

Mrs. COLE. I do, sir.

Mr. SMYSER. And not in bed at all?

Mrs. COLE. I do, sir.

Mr. SMYSER. And that she did not sleep any?

Mrs. COLE. She didn't sleep any. She had two competent physicians; but they didn't have brains enough to give her something to put her to sleep.

Mr. SMYSER. Then for two weeks she was on the tramp continuously, was she?

Mrs. COLE. Yes, sir.

Mr. SMYSER. And she did not sleep at all?

Mrs. COLE. She did not sleep.

Mr. SMYSER. You and your sister and the colored woman gave her all the attention you could?

Mrs. COLE. Yes, sir; we certainly did. And she didn't get any bruises, either. I guess I need a restraint sheet to keep me down.

Mr. SMYSER. Did she have any falls?

Mrs. COLE. No, sir; she didn't have any falls or fractures or bruises or scratches, or nothing else.

Mr. SMYSER. Did you sleep any during that period?

Mrs. COLE. I did not, sir; I was in office. I would stay in the office all day and stay up all night with my mother; and I am proud

to say that I kept her from getting any scratches or bruises before she went into St. Elizabeth's Hospital, and I didn't lose my mind either.

Mr. SMYSER. Nobody would suspect you of that, but I think, if you will permit me to say so, that you are a little bit unreasonable. The record here discloses, as I have stated, that as soon as an examination could be had, the fact was discovered that your mother had some fractured ribs.

Mrs. COLE. Yes, sir.

Mr. SMYSER. All of the evidence we have heard so far tends to show that she had been cared for over there and that there were no particular marks on her. Has it occurred to you that your mother may possibly have fractured her ribs before she was taken over there?

Mrs. COLE. No, sir; because I am positive that she did not. I could swear that she did not.

Mr. SMYSER. Do you know that somebody over there fractured her ribs?

Mrs. COLE. I don't accuse anyone of fracturing her ribs, but I do say that mother was put into a dark room without any light, and there was a bed in her room and a washstand, and I do think that when my mother was in that dark room possibly she may have fell over something and fractured her ribs, as she was in an excited condition. There was also a guard window in my mother's room, and instead of being protected, like this window over here [indicating] the window came out into the room, and stood in such a position that when my mother was walking around the room she could have very easily run into the window and struck herself here [indicating].

Mr. SMYSER. She would not do that purposely. I take it she had mind enough to know not to go up against anything that would injure her.

Mrs. COLE. In the dark she might not have seen it.

Mr. SMYSER. That was at night?

Mrs. COLE. At night.

Mr. SMYSER. Did you see that happen at night, yourself?

Mrs. COLE. I didn't see it at night; but I can imagine that such a thing might be possible.

Mr. SMYSER. Has it occurred to you that your mother may have fallen and gotten these fractured ribs?

Mrs. COLE. Do you mean in the hospital?

Mr. SMYSER. Yes.

Mrs. COLE. Yes, sir; I am positive that it happened in the hospital.

Mr. SMYSER. You do not mean to say, of course, that some attendant did that?

Mrs. COLE. I have never implied that; no, sir. I have never implied that and I won't say that an attendant struck my mother, but I do say that perhaps my mother was not watched carefully enough to prevent such an accident happening to her.

Mr. SMYSER. I take it that this is your idea. You and your sister and the colored woman that you had were with her constantly?

Mrs. COLE. Every second; she was not left alone a second.

Mr. SMYSER. And it was your idea that there should have been an attendant constantly with your mother over there; is that it?

Mrs. COLE. I think, sir, that my mother ought not to have been locked in a darkened room, where the nurse would only have gone

around there every fifteen or twenty minutes, in her frail condition, to look at her. The doors there were so heavy that unless you unlocked the door and went in you couldn't see what my mother was doing, and in five minutes something could have happened to her.

Mr. SMYSER. And notwithstanding that you were advised by three physicians, whose names you have given us, that it was better for your mother to be there, and notwithstanding what has occurred there, whether it occurred from actual violence or negligence on the part of the attendant, these same gentlemen still say to you that it is better for her to be there. Is that right?

Mrs. COLE. Yes, sir; and I think every doctor would say so, because the usual run of physicians are of the same opinion in regard to placing people in these institutions when they have nervous troubles. They think it is beneficial for them.

Mr. SMYSER. It would not be practicable for your mother to be kept any place else now, and would not have been for the last two years?

Mrs. COLE. Well, I think so, because I can't bring myself down to the opinion or belief that it was better for my mother to go there. I think that if my mother had been put in a suburban place with a couple of trained nurses it would have been better.

Mr. SMYSER. Were you in a position to do that?

Mrs. COLE. I was not in a position to do it.

Mr. SMYSER. Were your brothers?

Mrs. COLE. I have one brother who was.

Mr. SMYSER. Did you submit that to him?

Mrs. COLE. I did, sir. I pleaded with him for her.

Mr. SMYSER. What did this brother say to your plea in behalf of your mother?

Mrs. COLE. That he was not able to do it, and that it was better for her to go there.

Mr. SMYSER. So that you did not have the means of carrying out your idea as to what would be the best treatment for your mother, namely, to go to a suburban place and have a couple of trained attendants?

Mrs. COLE. No, sir.

Mr. SMYSER. You realized that if you had a suburban place it would take a couple of attendants, did you?

Mrs. COLE. I realized that fact; yes, sir. I had diagnosed it fully.

The CHAIRMAN. When you say that for two weeks you did not sleep at all, you do not quite mean that, do you?

Mrs. COLE. I positively do, sir.

The CHAIRMAN. Do you mean to say that during all that time you did not lie down and take a nap?

Mrs. COLE. I did not, sir. I stood on my feet in the office and had charge of the office and ran the office; and I also tried to run my mother. I tried to help her at home every night. I was in an exhausted condition, and they thought my health was going to break down when mama was taken away.

The CHAIRMAN. Was your sister also in office?

Mrs. COLE. No, sir; my sister was at home. She was in office, but she gave it up to take full charge of mother.

The CHAIRMAN. Your brothers, of course, knew this?

Mrs. COLE. They were acquainted with all the facts in the case.

Mr. SMYSER. Running back from the time your mother was committed, how long before that did your sister give up her office work?

Mrs. COLE. Mamma had a very ill spell for eight weeks previous to her becoming the least bit nervous, and sister had given up her position two months before that, because mamma was getting in a delicate condition.

Mr. SMYSER. She was in the house during the daytime while you were at office?

Mrs. COLE. Yes; the colored woman and my sister.

Mr. SMYSER. What is the name of this colored woman?

Mrs. COLE. Martha Boyd.

Mr. SMYSER. Is she a resident here?

Mrs. COLE. She lives at No. 16 R street NW., I think. No; I guess it is 216 R street NW. She has been an old family servant in our family for years.

The CHAIRMAN. Do you still continue your visits to the hospital?

Mrs. COLE. Yes, sir; I continued them until a month ago; but I am now out of the city. I expect to come back every two weeks to see my mother and spend a week with her.

Mr. HAY. Do you know anything about the use of a strait-jacket or anything of that kind?

Mrs. COLE. Yes, sir.

Mr. HAY. On your mother?

Mrs. COLE. My mother was placed in strait-jacket for three weeks, and we were not permitted to see her.

Mr. HAY. How do you know that?

Mrs. COLE. I went in and saw her in a strait-jacket, and I unlaced the strait-jacket and took it off and put it on the floor. I told Doctor Clark, her physician, that if they ever put it back on her again it would not be put on any other patient, because I would cut it up.

Mr. HAY. When was that?

Mrs. COLE. That was at the end of the third week after she had been there, when I found out that her ribs were fractured.

Mr. HAY. You do not know positively that this strait-jacket had been on her for three weeks?

Mrs. COLE. I am positive of it, because we heard her ribs were fractured, and it must have been on her, because our mother's face was not at the window. I had been around and located the window in order to see her at the window when I went there.

Mr. HAY. Describe the strait-jacket. What was it?

Mrs. COLE. The patient is put in with just a night dress on. When I found my mother she had a night dress on; but her night dress was brought clear up around her neck. The jacket was made with large rings in the back with laces across, and this was put on to her skin close to her body and fastened down. Then this sheet of canvas cloth came up and covered her around the neck, so that when she moved her neck this canvas cloth would rub against her throat.

Mr. HAY. Might not that jacket have been put on for the purpose of treating her broken bones?

Mrs. COLE. No; I think the jacket was put on for confinement. When I took it off I found that my mother's knees were skinned from the rest sheet, and she had a scratch from her knee down almost to her foot, and she had bruises on her body from rubbing against that rest

sheet made of canvas cloth. I went to Doctor Clark then and I said: "Doctor Clark, I think some of these people over here might have brains enough to invent something else for a rest sheet." Doctor Clark said: "This has just been invented, and we think it is pretty good." I told him that I differed with him; that I didn't agree with them that it was pretty good, and if he would go over and examine my mother he would find out about it.

The CHAIRMAN. He did examine your mother?

Mrs. COLE. Yes, sir; and then I found that my mother had a bruise around her throat here [indicating]. I got very angry and I went in and told Doctor Clark that if there was another bruise on my mother's throat, if they could take people to the police court from there, I should also take them there for a trial case, and see why these bruises are put there. Doctor Clark got very angry and went out. Then he came back and said, "I realize how you feel." I said, "If you realize how we feel toward our mother, why don't you come down and do something for her?" He said that he would. This was just three weeks before my mother's hip was fractured, and we had a terrible time with her. One of the nurses permitted her to fall on her back and she sprained her back terribly. Then we had to go through that. Then they permitted her to fall and hurt herself again, and I went over to see Doctor Clark about it. I thought that would be the last thing we would have to go through in those two years, but right on top of that her hip was fractured.

The CHAIRMAN. Why did you not induce your brother to take your mother out of that place if she has had all of this ill treatment?

Mrs. COLE. Because I think it would be a good idea to try and induce the community at large to put that hospital into such a condition that we could put our loved ones in there.

The CHAIRMAN. You would not, for such a reason, sacrifice your mother's well-being?

Mrs. COLE. No, sir; because it has already been sacrificed. I know, at this last moment, how she has been sacrificed, and I am only too glad to have an opportunity to express myself, because I think it is time for the community at large to awaken to the fact that St. Elizabeth's Hospital needs better attention, and that the nurses they have over there, which Doctor White gets from the backwoods of Maryland and Virginia, are not competent employees.

Mr. SMYSER. Would you take a position there?

Mrs. COLE. No, sir; not under Doctor White?

Mr. SMYSER. Under anybody?

Mrs. COLE. Yes, sir; if I was not married I would only be too glad to do so, so as to try to wake it up to do some things at St. Elizabeth's Hospital, and show them where they are in error.

Mr. SMYSER. Have you gone to the Secretary of the Interior and told him what was going on over there, and how this institution might be improved?

Mrs. COLE. I went to the Secretary of the Interior twice, but I did not see Secretary Hitchcock. I saw Mr. Smith, his private secretary, and I conversed with him and laid my mother's case before him. He said: "You go back and write it up." I did that, and Doctor White answered my communication. Then when my mother's hip was fractured I went back to Secretary Hitchcock and tried to see him

again, but I did not get an interview with him. I saw the same gentleman and he told me I would have to write the case up again, which I did, and which I have in writing, with Doctor White's answer to my communication.

Mr. SMYSER. Have you got a copy of that with you?

Mrs. COLE. I have not a copy of it with me. I loaned it to a gentleman to look it over; but I can get it.

Mr. SMYSER. Did you say that you sent a copy to Doctor White?

Mrs. COLE. I sent Doctor White an answer and I kept a copy of my answer.

Mr. SMYSER. The Secretary of the Interior, or his private secretary, asked you to write up your complaint; is that right?

Mrs. COLE. Yes, sir.

Mr. SMYSER. And you did it?

Mrs. COLE. I did, sir.

Mr. SMYSER. Did you forward it to the Secretary of the Interior?

Mrs. COLE. Yes, sir; and to the second communication I received no response.

Mr. SMYSER. Did you keep copies?

Mrs. COLE. Yes, sir; I did.

Mr. SMYSER. Where are they?

Mrs. COLE. I have them. Perhaps I can not get them for you to-day, but I can put them in your possession.

Mr. SMYSER. Are they in Washington?

Mrs. COLE. They are in Washington; yes, sir.

Mr. SMYSER. Will you be here on Monday?

Mrs. COLE. No, sir; I leave to-morrow on the 3.45 train.

Mr. SMYSER. Did you ever go to the Board of Visitors about this matter?

Mrs. COLE. No, sir; because I thought they were too small a body of people, and judging from what Mrs. Tanquerri said, I thought it was useless to visit them; that they were entertained so highly over there that they didn't seem to have time to go down to terra firma, and I thought it was no use for me to see them.

The CHAIRMAN. What do you mean by their being entertained?

Mrs. COLE. I mean that when they went over there they only stayed a short time, and they just saw the physicians without coming down to terra firma and seeing what they ought to see. So I came to the conclusion that it was no use to go and see them, and that if they didn't look after the kitchen diet they wouldn't look after anything else.

Mr. HAY. Did you make any complaint at all to Doctor White about the food?

Mrs. COLE. Yes; I carried the food to Doctor White six months before my mother's leg was fractured. I carried it to him about 6 o'clock, and Doctor White came down in a flurried condition and asked me to call during his office hours in the morning. I told him that my office hours were at the same time his were, and it was impossible for me to come at any other time. I had the food with me.

I supposed they had soup for dinner that day, and they had for supper some of the chopped-up meat from the soup bones or soup meat, and they had some sort of a cereal on the plate, and said oats was boiled so hard that it was not palatable for my mother to eat it. They had this meat and one slice of bread and a cup of tea and milk. My

mother said that she couldn't eat it. I carried the food over to Doctor White, thinking that he would rectify the matter; but Doctor White didn't like it very much, and said he thought that was pretty good food. If you will excuse the slang phrase, I will tell you what I said to him. I told him that if he thought that was pretty good food his appetite certainly must be on the bum, and I walked out very much disgusted. Then when my mother fractured her leg I again went to Doctor White and laid the case before him, and asked him if he would not bring up this said nurse who had been careless in regard to my mother, but Doctor White said that the case had been thoroughly investigated and that was all that could be done.

Mr. HAY. What did your brother say to that?

Mrs. COLE. I have told my brothers that, but they don't look at it in the light that us girls look at it, because they have not got the same warmth of feeling of heart and affection toward her that we have. Mamma has been with us so long and been sick so much that she has grown dear to us, and they, being married, have not felt as we have felt toward her.

Mr. HAY. How many patients are there in this same ward where your mother is?

Mrs. COLE. There are 26 patients in that ward.

Mr. HAY. And how many attendants?

Mrs. COLE. I think there are four girls in the daytime and two at night; but there was only one girl there for six or eight months. She did all the work in that hospital ward for six or eight months. They had one night nurse on there at night and finally, after persuading them for a long time, Doctor Clark put on two. He then put on Miss Willett and Miss Wilson at night. That was the time my mother happened to the accident. Miss Willett was put on as a special to watch the six small rooms down the corridor where my mother occupied one of them.

The CHAIRMAN. She was specially put on for that purpose?

Mrs. COLE. To watch those six small rooms down the corridor.

The CHAIRMAN. And especially upon your complaint that your mother was not getting proper attention?

Mrs. COLE. Yes, sir.

The CHAIRMAN. They put on another attendant particularly to watch your mother?

Mrs. COLE. Yes, sir; and it took those two girls to clean one untidy patient, whereas one nurse had been doing the same duty for five or six months before. Doctor Clark has stated that the nurse put on my mother's slippers and dress. Now, my mother put on her slippers and dress and gown and walked down into the corridor, and she walked down into a dormitory where there are so many bed patients, and where there are radiators and rocking chairs, etc., in the way, and she got her fall there.

Mr. SMYER. Did you see her walk down there on that morning?

Mrs. COLE. No, sir; but I know people who did.

Mr. SMYER. Who are the people who saw that?

Mrs. COLE. One of the girls told me that she saw it.

Mr. SMYER. Who are they?

Mrs. COLE. Miss Willett and Miss Wilson, and Mrs. McNamara, a patient. She said she saw my mother fall.

Mr. SMYER. Are those people patients or attendants?

Mrs. COLE. Miss Willett and Miss Wilson are nurses, and they told me that my mother walked down there——

Mr. SMYSER. Do not run on so fast, if you please.

Mrs. COLE. I just need a restraint sheet, I guess.

Mr. SMYSER. No; not that, exactly. You were not there yourself; but you say you got information from some people who were there. What are the names of the persons from whom you got that information?

Mrs. COLE. Miss Wilson and Miss Willett, the nurses who permitted her to fall, told me that mamma put on her own slippers and dressing gown and walked down there herself before they realized the fact.

Mr. SMYSER. I simply asked you for the names.

Mrs. COLE. Miss Willett and Miss Wilson.

Mr. SMYSER. Are they there yet?

Mrs. COLE. They are not in my mother's ward, but I think they are still employed there.

Mr. SMYSER. What was the other lady's name?

Mrs. COLE. Mrs. McNamara. She is a patient who saw my mother fall, and she told me that she screamed when she fell. They told me that they lifted my mother up and carried her in a walking position over there. They didn't notify us until after 11 o'clock. They sent to our house at half past 11 that morning, and the carelessness happened at 5 o'clock in the morning. We didn't know it until half past 11.

The CHAIRMAN. Did your brother know it before that time?

Mrs. COLE. No, sir; I don't think he did.

The CHAIRMAN. What is the name of your brother who has particular charge of this matter?

Mrs. COLE. Milton R. Griffin.

The CHAIRMAN. Does he live here?

Mrs. COLE. He has not had the particular care of her, but he is the one that put her there. As for the care part, that comes from the female side.

The CHAIRMAN. His name is Milton R. Griffin?

Mrs. COLE. Yes, sir.

The CHAIRMAN. What is his address?

Mrs. COLE. His address is 141 D street SW., but I don't think he would do you much good, though.

Mr. SMYSER. Why not?

Mrs. COLE. Because he would go on the other side of the fence.

Mr. SMYSER. What side of the fence are you talking about?

Mrs. COLE. I mean that he would go on the side of Doctor Clark, because he has not been to the hospital often enough to know the facts in the case.

Mr. HAY. Don't you think he would believe what you told him?

Mr. SMYSER. Would he tell the truth under oath?

Mrs. COLE. I think he would tell what Doctor Clark told him.

Mr. SMYSER. If he was asked a question under oath, would you believe him?

Mrs. COLE. Not unless he expressed himself just as I do; I wouldn't.

Mr. HAY. Then you mean to say that he does not believe what you say?

Mrs. COLE. I mean to say that my brothers do not believe what we say because they fail to comprehend the situation. They are like so

many people in Washington. They are blind and they can't see. So many other people put their loved ones over there, but they are blind and can't see. They go in one door and out of the other, but they don't understand, and they don't want to understand. They want to put them in there to get them out of the way; but I didn't put my mother in there to get her out of the way.

Mr. SMYSER. What makes you say that? We have heard that before, and if you can tell us now of a single patient over there who is simply put there for the purpose of getting him out of the way, please tell us about it; but do not indulge in romances. We want facts.

Mrs. COLE. Yes, sir.

Mr. SMYSER. If you have knowledge of such an instance, I would be pleased to hear you tell it.

Mrs. COLE. There is an old lady over there who just passed away the other night, and her daughters put her there and won't take her home. She has been there for eight years.

Mr. SMYSER. What is her name?

Mrs. COLE. Mrs. McAvoy.

Mr. SMYSER. Where are those daughters.

Mrs. COLE. I don't know anything about her family; but she said her daughters wouldn't take her home.

Mr. SMYSER. She is dead and in heaven, I hope.

Mrs. COLE. I hope so, too, instead of being in that place.

Mr. HAY. I understand from your statement that Doctor Clark and the people in charge of the ward give you free access to it at all times?

Mrs. COLE. Yes, sir; they have been very kind in that particular and I appreciate that part of it very much.

Mr. HAY. You had an opportunity to see everything that went on?

Mrs. COLE. Everything in my mother's ward. I am not complaining of anything there except the treatment my mother has received.

Mr. HAY. Your complaint is, then, that they do not have attendants enough to take proper care of her?

Mrs. COLE. Not enough to take proper care of her. I am not complaining about the girls over there, and I am not saying that the girls are not nice girls; but I am complaining that the help over there is not competent, and the women they employ are not competent to take charge of the ward like the one my mother is in. Such a ward out not to be left without a trained nurse in it day and night. It is very well to put nurses under that trained nurse, but at no time ought that ward, being a dying ward, to be left alone without a trained nurse and a competent nurse who can administer medicine when a message is 'phoned over to give this medicine, which has very often been the case with my mother.

TESTIMONY OF MRS. SARAH A. WISE.

Mrs. SARAH A. WISE, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. Mrs. Wise, do you reside in the city of Washington?

Mrs. WISE. Yes, sir.

The CHAIRMAN. Have you lived here for any considerable length of time?

Mrs. WISE. Yes, I have lived here all my life.

The CHAIRMAN. Do you know anything about St. Elizabeth's Hospital?

Mrs. WISE. I think I know quite a little.

The CHAIRMAN. Do you visit there frequently?

Mrs. WISE. Yes. I have been a visitor at the asylum six days out of seven for months at a time; for eight months, on two occasions.

The CHAIRMAN. Have you anyone there in whom you are interested?

Mrs. WISE. I have a daughter.

The CHAIRMAN. A daughter?

Mrs. WISE. Yes, sir.

The CHAIRMAN. In what ward is she confined?

Mrs. WISE. In L building now, but she has been in the hospital ward. She has been back and forth three or four times, and always in the hospital ward until within a few weeks.

The CHAIRMAN. What is the matter with her? I mean, was she sent to the hospital ward for any particular disease, or on account of her general physical condition?

Mrs. WISE. We kept her at home for a year, and the physicians we had called it melancholia; but it does not seem to be that form now. She is generally in good spirits now. She was very melancholy at that time.

The CHAIRMAN. Do you know why, particularly, she was sent to the hospital ward in the asylum?

Mrs. WISE. Well, because of her physical condition I think, as well as her mind.

The CHAIRMAN. And she has been there how long?

Mrs. WISE. She has been there off and on for three or four years. The first time she was there eight months, and the second time eight months; and another time all summer; and now she has been back several weeks. We take her home when we can and keep her.

The CHAIRMAN. When her condition is such that you can take her home you do so?

Mrs. WISE. Yes; she gets so I can take care of her. She gets very much better, and I take her home and keep her as long as I can care for her.

The CHAIRMAN. Has her care and treatment over there been satisfactory to you?

Mrs. WISE. Very, very. I, of course, like most everybody, had a great horror of St. Elizabeth's, but because of the kindness to my daughter and other patients, all that left me in a very short time. I consider it a fine place for her.

The CHAIRMAN. Your horror of St. Elizabeth's was only the natural feeling that all of us have against sending people that are near and dear to us to any institution?

Mrs. WISE. Yes.

The CHAIRMAN. That is a natural feeling that everybody has.

Mrs. WISE. That is a natural feeling. It has all left me because of the kindness that my daughter has received and that the other patients in the ward have received. I have been there observing, and

I always get very much attached to the nurses because of their kindness. I have not the slightest thing to complain of.

The CHAIRMAN. What is your feeling toward the doctors that are there?

Mrs. WISE. Well, I have been associated with Doctor Clark, and I consider him one of the finest men that ever lived. Oh, he has certainly been a good friend. I could not pick a flaw in him, and that is the general opinion of everybody I have talked to about it.

The CHAIRMAN. You can not imagine Doctor Clark purposely neglecting patients, can you?

Mrs. WISE. Oh, my, no; never. He is too kind-hearted.

The CHAIRMAN. What as to the food in the hospital? Have you had any occasion to complain of that?

Mrs. WISE. My daughter complained of the food, and of course I kept her as well as I could in things that she would want.

The CHAIRMAN. Naturally.

Mrs. WISE. But I never saw the food.

The CHAIRMAN. Did she complain of the character of the food?

Mrs. WISE. Yes, she complained; but she is very particular about her eating, and I attributed some of it to that. I can not say from actual knowledge, but she did not eat as much as I thought she ought to. She ate very little in the hospital ward. Where she is now she brags of the food and eats at meals, and is very well satisfied as far as eating is concerned.

The CHAIRMAN. Is the doctor in charge of the present ward where she is Doctor Logie?

Mrs. WISE. No.

The CHAIRMAN. Is it Doctor Clark still?

Mrs. WISE. Doctor O'Malley, I think.

The CHAIRMAN. She now is perfectly satisfied with the food she receives in this ward?

Mrs. WISE. Yes, she is pleased. She tells me every day what she has to eat and how she enjoys her meals.

The CHAIRMAN. Does she speak to you about the nurses and about Doctor O'Malley?

Mrs. WISE. Does she speak to me?

The CHAIRMAN. Does she speak of them; yes.

Mrs. WISE. No, she never says anything about the doctors.

The CHAIRMAN. But your general observation is that she has had as good care as it would be possible to give her, considering her physical and mental condition?

Mrs. WISE. I can not complain at all; indeed, I can not. I do not know of one thing I could complain of. I would go to the nurses frequently. My daughter was in condition to take out most every time I would go, and of course I had to call on the nurses a great many times. My daughter would go in her room and get her hat and come out. I used to take her delicacies and give them to the nurses, sometimes, to keep for her. I went a great many times and I always found them kind to the patients in every way. I have seen them very affectionate with the patients—the nurses—and the kindness is what took all the horror away of the place.

TESTIMONY OF MRS. MARGARET COLBERT.

Mrs. MARGARET COLBERT, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Will you give your full name to the stenographer, Mrs. Colbert?

Mrs. COLBERT. My name is Mrs. Margaret Colbert.

The CHAIRMAN. Are you a resident of Washington?

Mrs. COLBERT. Yes, sir; born and raised in the city of Washington.

The CHAIRMAN. And you live here now?

Mrs. COLBERT. Yes, sir; I live here now.

The CHAIRMAN. Have you ever been an inmate of St. Elizabeth's Hospital?

Mrs. COLBERT. Yes, sir; I was an inmate of St. Elizabeth's for less than two weeks, through a bad husband that was keeping a woman at—the number is 2521 I street——

The CHAIRMAN. We do not care about that.

Mrs. COLBERT. I will tell it right straight along. I will make few words of that.

The CHAIRMAN. I do not care about that, Mrs. Colbert.

Mrs. COLBERT. I know that; I simply mention it. How I came to go there was through a misunderstanding more than anything else. One Saturday night he came home and beat me into an insensible condition, and I consider that I should have been taken to one of the medical hospitals in the city, when I found myself over to St. Elizabeth's.

I didn't know where they were taking me, but I found myself to St. Elizabeth's; and I can not say anything but the best for the institution. As for Doctor Clark, I consider him a good doctor and a perfect gentlemen. I saw him make his rounds every morning. He was kind and considerate. He had a smile and a kind word for all the inmates. I was particular; I had a great horror of that place—I often heard of it—the first time I visited it. I never visited it in my life until I got in there. I observed. I was particular to watch and notice everything I could learn what went on in the institution, and I saw many instances there that relieved my mind of the horror of the place, just by calling it that name—the insane asylum. I observed a woman there by the name of Mrs. Duncan, and she was not able to use solid food, and I saw where Doctor Clark, and Doctor White here also, ordered her milk and eggs, and a small amount of liquor put into it for nourishment. I also saved the same woman three or four different times from a beating by the other inmates—not by the nurses, of course. It was the inmates which would get to fighting. You can't stop them over there. I saved her also—she used to be seized with spells of weakness, and she was liable to fall forward and bust her head then. That was of course not Doctor White's or Doctor Clark's fault, either. I took hold of her and placed her in a chair. I worked all the time I was there. Not that I was compelled, but I used to seek work and ask it of the nurses for to keep my mind and time occupied. The hollering. I know that anyone that is sane and placed there, to hear the way and to see the way the patients will go on, and to hear the way they will scream and holler during the night, if you are not crazy and are kept there you certainly

will go crazy inside of six months. But as for the nurses, I observed, I know, Mrs. Edwards over there, and Miss Tippet and Miss Kendall, and I consider them all excellent, competent nurses. I noticed they were kind to the old patients. I saw them comb their hair every morning, and wash their faces, and be particularly attentive to them. I thought it was so nice and kind to treat the aged people nicely. That was in the ward I was in. I was there less than two weeks. When I came into court I, of course, was tried by a jury, and I was declared instantly of sound mind, and three of the jurors got up and testified, "We know that old ex-policeman, Mike Colbert; he is no good"—three big business men——

The CHAIRMAN. We do not care about that, Mrs. Colbert.

Mrs. COLBERT. He was trying to put me there so he could live with this woman, Annie Kenealy——

The CHAIRMAN. We are not interested——

Mrs. COLBERT. Annie Kenealy, at 2521 I street NW., who has got a petty job in the Treasury Department——

The CHAIRMAN. Wait a moment. We do not want to go into that.

Mrs. COLBERT. I want to tell you why I came to be put there.

The CHAIRMAN. How did you come to come here to-day?

Mrs. COLBERT. I will tell you. I came here to-day in the interest of Doctor White and Doctor Clark, because I consider it just.

The CHAIRMAN. Nobody asked you to come?

Mrs. COLBERT. Nobody whatever asked me.

The CHAIRMAN. You came as a voluntary witness?

Mrs. COLBERT. I came as a voluntary witness to state what I witnessed while I was there.

The CHAIRMAN. We are very much obliged to you for coming.

Mrs. COLBERT. And, why, I noticed——

The CHAIRMAN. Yes, go on.

Mrs. COLBERT. As I stated before, I noticed one woman there, a Jewess. Speaking of the strait-jacket, I saw something of that, and I helped to put it on one of her arms. There was a Jewess there, and there was a big glass window in the ward I was in—the room. It was as large from the floor as right across, I think, where that mirror is [indicating]. I witnessed her to destroy that window with a rocking chair twice in less than two weeks, and saw the strait-jacket put on her, and helped the nurse to put one arm in it, but there was no unnecessary violence used toward her, only just to put her in it. She destroyed the rocking chair and also this large window.

The CHAIRMAN. We are very much obliged to you for coming, and we are very glad to have had you.

Mrs. COLBERT. Is that all?

The CHAIRMAN. That is all. I am very much obliged to you.

Mrs. COLBERT. You are welcome.

TESTIMONY OF MRS. HONORA O'BRIEN.

Mrs. HONORA O'BRIEN, being duly sworn, was examined and testified as follows:

The CHAIRMAN. You are connected with St. Elizabeth's, are you not?

Mrs. O'BRIEN. Yes.

The CHAIRMAN. What is your position there?

Mrs. O'BRIEN. At present I am the matron.

The CHAIRMAN. How long have you been the matron?

Mrs. O'BRIEN. Since November last.

The CHAIRMAN. How long have you been connected with the hospital?

Mrs. O'BRIEN. Since October, 1890.

The CHAIRMAN. 1890?

Mrs. O'BRIEN. Yes, sir.

The CHAIRMAN. So you have been there sixteen years?

Mrs. O'BRIEN. Yes.

The CHAIRMAN. Did you go there first as a nurse or attendant?

Mrs. O'BRIEN. I went first as an attendant and was promoted to supervisor at the end of two years, and for fourteen years I was supervisor.

The CHAIRMAN. Did you take the regular course of the nurses training there?

Mrs. O'BRIEN. No, sir; I am not a nurse.

The CHAIRMAN. You have been attendant, supervisor, and are now matron?

Mrs. O'BRIEN. Yes.

The CHAIRMAN. What are your duties in the hospital?

Mrs. O'BRIEN. If I read this, probably it will outline my duties. It is a copy of a letter sent to the physicians—or I will pass it to you gentlemen.

The CHAIRMAN. No; read it, or give it in your own words, whichever you choose.

Mrs. O'BRIEN (reading):

Hereafter the various wards in your department will make out requisitions upon the store-room once in two weeks instead of weekly, as heretofore. For the purpose of putting this scheme into effect, the entire hospital has been subdivided into ten sections, as hereinafter set forth, and each section will be assigned a day, the scheme to become effective next Monday, November 6. Upon the day assigned to each section, the matron, Mrs. O'Brien, will visit the wards thereof and satisfy herself that the various articles requisitioned for are in fact necessary for the conduct of the department for the succeeding two weeks, and at this time also the several wards should be in a position to call her attention to any material for condemning.

Requisitions for clothing will be made, as heretofore, once a month and in each instance upon the day assigned for general ward requisitions.

Monday, November 6, West Side.

Tuesday, November 7, Home building.

Wednesday, November 8, Relief building.

Thursday, November 9, Allison building.

Friday, November 10, Atkins Hall, East Lodge, Center Lodge.

Monday, November 13, C, M, and Q buildings and Nurses' Home.

Tuesday, November 14, J, K, and L buildings, Toner building, and Oaks A and B.

Wednesday, November 15, Richardson Group.

Thursday, November 16, B building.

Friday, November 17, Howard Hall, Annex, and West Lodge.

That is a copy of a letter that was sent by the superintendent.

The CHAIRMAN. Sent to you?

Mrs. O'BRIEN. No; sent to each physician of the department by the superintendent when I took charge, notifying him that I would come in his department.

The CHAIRMAN. Was that a letter, you mean, that you sent?

Mrs. O'BRIEN. This is a letter that the superintendent sent to the head of each department, notifying them that I would be in their department.

The CHAIRMAN. Yes; I see. So you are the general matron of the entire hospital.

Mrs. O'BRIEN. Yes, sir.

The CHAIRMAN. And that merely fixes your time, so that you could give particular attention to——

Mrs. O'BRIEN. To each.

The CHAIRMAN. To the several buildings and wards and the several departments?

Mrs. O'BRIEN. Yes.

The CHAIRMAN. Have you a special office in one of the buildings?

Mrs. O'BRIEN. I have a desk, but I have very little time, because I visit around.

The CHAIRMAN. Is your desk in the Administration building?

Mrs. O'BRIEN. No, sir; it is in the Toner building.

The CHAIRMAN. Do you have charge of the issuing of supplies from the linen room?

Mrs. O'BRIEN. Yes, sir.

The CHAIRMAN. Do you have anything to do with the food in the hospital?

Mrs. O'BRIEN. No, sir.

The CHAIRMAN. Your duties pertain largely to the general house-keeping of the establishment?

Mrs. O'BRIEN. To the linen, the clothing, the bed linen, towels, soaps, etc.—everything except the food supplies.

The CHAIRMAN. Everything except the food supplies?

Mrs. O'BRIEN. Yes, sir.

The CHAIRMAN. Do you make frequent visits to the wards so that you come in contact with the patients to any considerable extent?

Mrs. O'BRIEN. Yes, sir; I am directly in the female department. I go in all the wards, but I am there directly.

The CHAIRMAN. Do any of the patients under you work?

Mrs. O'BRIEN. In the sewing room and the repair rooms; yes. They come under me.

The CHAIRMAN. How many assistants have you? How many domestics? Have you charge of the domestics, by the way?

Mrs. O'BRIEN. I have charge of some. Well, in the Center and in the Administration building the domestics there come under my supervision, and the seamstresses, and the sewing room, and the repair room.

The CHAIRMAN. Was this position which you now occupy a recently created position?

Mrs. O'BRIEN. It was created by the present superintendent; yes, sir.

The CHAIRMAN. Do you think the creation of this position which you occupy and this assignment of duties which you have just read adds to the efficiency of the hospital itself?

Mrs. O'BRIEN. Yes, sir; I do.

The CHAIRMAN. When the attendants in the several wards in the hospital wish to receive supplies they make requisitions upon you, do they not?

Mrs. O'BRIEN. I go into the ward and look over their linens and if they can be repaired I send them to the repair room. If they are past repairing I make out requisitions for new.

The CHAIRMAN. Suppose, by reason of some occurrence that has happened in any of the wards they need additional supplies on days other than those on which you visit a particular ward, do they send to you?

Mrs. O'BRIEN. Yes, sir; they have the privilege of making out a special order, which I approve.

The CHAIRMAN. If you approve of it, additional linen is issued?

Mrs. O'BRIEN. Anything that is required—soaps, or anything.

The CHAIRMAN. You have been there, you say, sixteen years?

Mrs. O'BRIEN. Yes, sir.

The CHAIRMAN. What do you think, generally, in regard to the care and the treatment of patients that you have seen there?

Mrs. O'BRIEN. I do not think it could be improved on.

The CHAIRMAN. Do you think the attendants are attentive?

Mrs. O'BRIEN. I am sure they are. While I was supervisor I made not less than three and four and five visits there through the wards and I never saw any occasion to make me think otherwise.

The CHAIRMAN. And you think the same of the nurses?

Mrs. O'BRIEN. I think just the same of the nurses.

The CHAIRMAN. Do you think the doctors carefully attend to their duties?

Mrs. O'BRIEN. I know they do. I had every opportunity and still have every opportunity of knowing it, and I know they do.

The CHAIRMAN. Do you know of any cases of cruelty that have come under your observation or that you have heard talked about there?

Mrs. O'BRIEN. I only know of one case that occurred—I don't recall just how long ago—when I was supervisor. An attendant slapped an old lady, and on the statement of another patient we investigated it and found out it was so. Doctor White discharged him. That is the only case I know of.

The CHAIRMAN. That is the only case you had to investigate as supervisor?

Mrs. O'BRIEN. Yes, sir.

The CHAIRMAN. And that resulted in the prompt dismissal of the accused attendant?

Mrs. O'BRIEN. Yes, sir; the dismissal of the attendant.

The CHAIRMAN. What about the food?

Mrs. O'BRIEN. Well, I consider the food good.

The CHAIRMAN. That is, including the butter?

Mrs. O'BRIEN. Well, of course, you know it is not butter; but I consider the food, on the whole, very good, indeed.

The CHAIRMAN. Is it generally well cooked?

Mrs. O'BRIEN. At times it is very well cooked. Sometimes there are occasions when it is not just as we would like it.

The CHAIRMAN. Have you ever had occasion to make any complaints of the character of the food?

Mrs. O'BRIEN. Not of the character; but sometimes of the way it was cooked, and it would be improved.

The CHAIRMAN. Your complaint met with a prompt response?

Mrs. O'BRIEN. Yes.

The CHAIRMAN. And things were changed for the better?

Mrs. O'BRIEN. Yes.

The CHAIRMAN. How about the clothing, Mrs. O'Brien? Was that, in your opinion, of proper quality and character?

Mrs. O'BRIEN. Yes, sir; it is of the very best material that could be gotten—good substantial material; very good.

The CHAIRMAN. You speak of having a sewing room or repair room, or whatever you call it.

Mrs. O'BRIEN. I have a sewing room and repair room.

The CHAIRMAN. How many patients are there that work in there?

Mrs. O'BRIEN. They vary, of course. Probably in the sewing room we have sometimes 10, 12, or 14 and then there would be some days that we would not have so many, as the patients feel like coming.

The CHAIRMAN. Do the patients generally like to work?

Mrs. O'BRIEN. Some do, yes; some like it very much. Of course it is just optional with them. If they want to come we are glad to have them. It just depends on themselves.

Mr. BARCHFELD. The patients do not receive any compensation for their work?

Mrs. O'BRIEN. I think there are a few that get some little. I am not sure about that, though.

Mr. BARCHFELD. There was a time in the management of the institution when every patient who saw fit to work was rewarded by some remuneration.

Mrs. O'BRIEN. Yes.

Mr. BARCHFELD. That, however, has been done away with?

Mrs. O'BRIEN. Yes, sir.

Mr. BARCHFELD. You still think, however, there are a few patients who are drawing pay?

Mrs. O'BRIEN. I am not quite sure, but I think there are a few.

Mr. HAY. Is there anything you can suggest toward the improvement of the institution?

Mrs. O'BRIEN. No, sir; I do not see how they could. They do everything that is possible, and as I say, I have been in a position to know. I have been in the position of attendant and supervisor, and I still go in the wards, the female wards particularly. I am in and out all the time.

The CHAIRMAN. Will you tell me something of the system that you use as matron of this establishment in regard to the repairs? I mean the clothing that needs repairing comes under your inspection?

Mrs. O'BRIEN. Yes, sir.

The CHAIRMAN. And you determine as to whether it can be properly repaired or whether it is to be sent to the rag bag?

Mrs. O'BRIEN. Yes, sir.

The CHAIRMAN. That all has come to you and you make the inspection, and you go to the several wards?

Mrs. O'BRIEN. I go to the wards and inspect them.

The CHAIRMAN. Has each of the wards a linen room connected with it?

Mrs. O'BRIEN. Yes, sir; each ward has a linen room.

The CHAIRMAN. How about the laundry? Do you go there?

Mrs. O'BRIEN. Well, I go there occasionally. I am not connected with it, but I go in and out. The repair room is very close. It is in the laundry building.

The CHAIRMAN. Did you ever see anything in the nature of harsh treatment of patients who were working in the laundry?

Mrs. O'BRIEN. No, sir; I never have.

The CHAIRMAN. Do you know a man by the name of Maenche?

Mrs. O'BRIEN. Yes, sir.

The CHAIRMAN. What sort of a man is he?

Mrs. O'BRIEN. I do not know a great deal about Mr. Manche. Since last November I have been going in and out a great deal, and he seemed to be attentive to his duties as far as I could judge, around the machinery and looking after things, but I saw very little of him. I have known him and have seen him there, of course, being employed in the hospital.

The CHAIRMAN. Did you ever see him when you thought he was intoxicated?

Mrs. O'BRIEN. No, sir; I never did.

The CHAIRMAN. There was a Mrs. Snider who made some claim here that some of the clothing belonging to her child, I think, had been sent to the laundry and never came back, and that she could not get any satisfaction in regard to it. Did you ever hear anything about that?

Mrs. O'BRIEN. Not until I read it in the newspaper. That was the first I heard of it and I hardly think it is true, because we have a very competent girl in the ward and I am sure she looked out for that kind of thing, and she would have reported it, I think. I am pretty sure she would if there was anything of the kind.

The CHAIRMAN. Who counts the clothing that goes to the laundry and comes back again in the several wards?

Mrs. O'BRIEN. They count it in the laundry.

The CHAIRMAN. And an attendant in the several wards that send these clothes there to the laundry sees that they get back their proper quota, and if they do not it would be reported to you, would it not?

Mrs. O'BRIEN. Yes, or to the supervisor.

The CHAIRMAN. But it would eventually get to you in the regular routine of business, and you would know of it?

Mrs. O'BRIEN. I would know of it; yes, sir.

The CHAIRMAN. Does that happen often?

Mrs. O'BRIEN. Sometimes clothing is not gotten out every week. Some things will happen, I don't know why, and it may not come back for a week or two, but they usually come back.

The CHAIRMAN. It is part of your duty to investigate things of that kind?

Mrs. O'BRIEN. Yes.

The CHAIRMAN. To see that the right amount of linen is sent back to the ward whence it came?

Mrs. O'BRIEN. Yes, sir.

Mr. HAY. There has been a good deal said about strait-jackets?

Mrs. O'BRIEN. I beg your pardon?

Mr. HAY. Strait-jackets. Do they come under your supervision?

Mrs. O'BRIEN. I suppose they would.

Mr. HAY. I mean if they are torn, would you have to have them repaired?

Mrs. O'BRIEN. Yes, they would come under my supervision.

Mr. HAY. How many do you have repaired?

Mrs. O'BRIEN. Since November I do not recall more than one that has been down there to be repaired. I do not recall but one.

Mr. HAY. How about the strait-jackets. Are they used very much?

Mrs. O'BRIEN. No, sir; they are not.

Mr. BARCHFELD. You, as matron, do not have many requisitions for them?

Mrs. O'BRIEN. I have never had any since I have been appointed matron; and for the last six or seven years there have been very, very few used—only in extreme cases.

The CHAIRMAN. Mrs. O'Brien, have you anything to say as to the present management as compared with the management under either Doctor Richardson or Doctor Godding? You were there under both of them, were you not?

Mrs. O'BRIEN. Yes.

The CHAIRMAN. Is there anything you have to say relative to a comparison?

Mrs. O'BRIEN. As I say, there is less restraint, and the patients have more privileges. I am speaking more particularly of the female patients, because I have been more closely associated with them. They have more privileges in every way, and on the whole, I think, if anything, it is better, more systematic. At least, I find it so.

The CHAIRMAN. You think that during the time you have been there there has been a general and gradual increase in the liberty of patients and in the betterment of their care?

Mrs. O'BRIEN. Yes, sir; I do.

Mr. SMYSER. Do your patients there now have underwear in the summer season?

Mrs. O'BRIEN. I did not get that.

Mr. SMYSER. Do your patients there now, in the summer season, have underwear?

Mrs. O'BRIEN. In the female department they have always had summer underwear; and in the male department—this is the first summer I have had anything to do with it—we have ordered thin underwear for them. As I say, I have not seen them in there in any other year, but in the female department we have always had summer underwear.

TESTIMONY OF R. L. BROWNING.

R. L. BROWNING, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. You are Robert L. Browning, are you?

Mr. BROWNING. Yes, sir.

The CHAIRMAN. Are you employed in St. Elizabeth's?

Mr. BROWNING. I am.

The CHAIRMAN. How long have you been there?

Mr. BROWNING. Nine years.

The CHAIRMAN. Where did you live before you went there?

Mr. BROWNING. In Virginia.

The CHAIRMAN. In what county?

Mr. BROWNING. Rappahannock.

The CHAIRMAN. Is Mr. Hay your Congressman.

Mr. BROWNING. I think he is.

The CHAIRMAN. Will you name the wards you have been on since the 1st of October, 1903?

Mr. BROWNING. I have been in Howard Hall serving continuously from 1903 to the present time. I have been there since 1901.

The CHAIRMAN. On this same ward?

Mr. BROWNING. On this same ward, since 1901—five years.

The CHAIRMAN. What ward?

Mr. BROWNING. Howard Hall, 7.

The CHAIRMAN. That is where the criminal insane are?

Mr. BROWNING. That is where the notorious people are all confined.

The CHAIRMAN. What sort of people come under your control?

Mr. BROWNING. I think we have got all sorts.

The CHAIRMAN. They are all criminal insane?

Mr. BROWNING. Not all criminals.

The CHAIRMAN. Some that have been indicted?

Mr. BROWNING. Men that have been indicted. We have some that have no charge against them at all, but they are confined there.

The CHAIRMAN. Why are they sent over with the criminal insane?

Mr. BROWNING. I guess it is on account of their fighting qualities.

The CHAIRMAN. How many men are there directly under you?

Mr. BROWNING. I have had as high as 23. The capacity of the ward is 15, but I have had as high as 23.

The CHAIRMAN. How many are there to-day?

Mr. BROWNING. Nineteen.

The CHAIRMAN. How many attendants are there connected with that ward?

Mr. BROWNING. Two. There is two sides of the ward, but the man that relieves me he works the men at unloading coal.

The CHAIRMAN. Do these men under your control load coal?

Mr. BROWNING. Yes; I have some men on my ward that help unload coal.

The CHAIRMAN. What is the name of the man with you?

Mr. BROWNING. His name is F. Connell.

The CHAIRMAN. Then there are two attendants?

Mr. BROWNING. There are two assigned to the ward, but he works the men out.

The CHAIRMAN. That means that some of the patients are taken out by him?

Mr. BROWNING. Yes; I have three that work out with him, and the rest are left with me.

The CHAIRMAN. You have charge of the rest?

Mr. BROWNING. Yes.

The CHAIRMAN. You are the day attendant?

Mr. BROWNING. Yes, sir.

The CHAIRMAN. How many are in the same ward at night?

Mr. BROWNING. Attendants?

The CHAIRMAN. Yes.

Mr. BROWNING. There is not anyone left there at night. The night watchman goes through every hour.

The CHAIRMAN. Are these men locked in separate rooms at night?

Mr. BROWNING. They are locked in separate rooms at night, and a few of them are in a dormitory, the least disturbed class.

The CHAIRMAN. What methods of restraint do you use in that ward with refractory patients?

Mr. BROWNING. In the last three years I have not used any restraint whatever.

The CHAIRMAN. Not even this canvas jacket?

Mr. BROWNING. Not even the strait-jacket, or any restraint.

The CHAIRMAN. Do you not use these leather wristlets?

Mr. BROWNING. In the last three years I have not used those on my particular ward.

The CHAIRMAN. How do you manage the patients when they get refractory?

Mr. BROWNING. We lock them up.

The CHAIRMAN. You put them in their rooms and lock the door?

Mr. BROWNING. We put them in their rooms and lock the door.

The CHAIRMAN. Do you ever have much trouble in having them go in?

Mr. BROWNING. Sometimes we have a little trouble.

The CHAIRMAN. It is a case of muscle against muscle, then?

Mr. BROWNING. It is a case of muscle against muscle. I must say I have not had any of that class for the last three or four years that I have had to lock up.

The CHAIRMAN. You have not?

Mr. BROWNING. No.

The CHAIRMAN. Are they generally fairly obedient to you?

Mr. BROWNING. They are really obedient.

The CHAIRMAN. How do you treat them?

Mr. BROWNING. Just like I would my own children—if I had any.
[Laughter.]

Mr. SMYSER. In the true Virginia style?

Mr. BROWNING. In the true Virginia style.

The CHAIRMAN. Do you ever hit them?

Mr. BROWNING. Do I ever hit them? Never.

The CHAIRMAN. Do you ever choke them?

Mr. BROWNING. I don't have to use that kind of restraint.

The CHAIRMAN. You do not put your knee in the small of their back and get a half-twist with your elbow around their throat?

Mr. BROWNING. No; I don't have to use that at all.

The CHAIRMAN. Sometimes when you tell them to go to bed, for instance, do they not object?

Mr. BROWNING. No; I have never had any trouble getting them to go to bed at all.

The CHAIRMAN. You say three of them work at unloading coal. Is this the same three people that are out doing that, or do you send different ones out?

Mr. BROWNING. Yes, they are all able-bodied men.

The CHAIRMAN. Are they all white?

Mr. BROWNING. They are all white that I have charge of.

The CHAIRMAN. What do you think about the food there?

Mr. BROWNING. That is a very delicate question for me to answer.

The CHAIRMAN. All right, answer it.

Mr. BROWNING. Well, I think it could be improved upon.

The CHAIRMAN. What is the matter with it?

Mr. BROWNING. Well, sometimes it is not properly cooked.

The CHAIRMAN. How about the quality of it, apart from the cooking?

Mr. BROWNING. You know I never was a cook, and I never saw it before it was cooked, but only after it is cooked.

The CHAIRMAN. How about the meat? Is the meat good generally?

Mr. BROWNING. No; as a general thing we don't have very good meat.

The CHAIRMAN. Do you mean it is tough?

Mr. BROWNING. It is. The building where I am, Howard Hall, I think is the farthest from the central kitchen, and I guess our food is brought the length of three squares on trucks. It comes through tunnels, and naturally there is a draft, and it is calculated to cool the food off, and of course when we get it it is rather cool.

The CHAIRMAN. Have you anything in the nature of a heating table there?

Mr. BROWNING. No; but we could very easily have a kitchen in the basement of the building where I am. We have between 135 and 140 patients in that building and about 21 employees, including the supervisors and all. It makes a total of nearly 160, and I think with a kitchen in the basement—we have a basement there that is adapted to such purposes—and if it was fixed up we could have a kitchen.

The CHAIRMAN. You think that would improve the character of the food?

Mr. BROWNING. I think it would improve the condition of the food very much.

The CHAIRMAN. Your complaint in regard to the condition of the food is more in regard to the cooking and the fact that it is not served hot enough?

Mr. BROWNING. I think so.

The CHAIRMAN. Is there enough food?

Mr. BROWNING. As a general thing we always get enough in quantity.

The CHAIRMAN. Do the attendants there eat the same food the patients do?

Mr. BROWNING. They do.

The CHAIRMAN. When you complain about the food it is on your own account, as well as on the patients' account, is it not?

Mr. BROWNING. Yes; and on the patients' account, as well as on our own.

Mr. HAY. Are you on the ward with Edgar Ball?

Mr. BROWNING. Not since 1900.

Mr. SMYSER. Are you married?

Mr. BROWNING. No, sir.

Mr. SMYSER. How old are you?

Mr. BROWNING. I am 36.

Mr. SMYSER. Now, sir, I have heard something about you, and I want to get it in the record.

Mr. BROWNING. I am glad you have.

Mr. SMYSER. You have no trouble scarcely with your patients?

Mr. BROWNING. No, I must say I have not had any trouble with mine, in my particular ward. I am only speaking of my particular ward.

Mr. SMYSER. I understand, those under your care.

Mr. BROWNING. Those under my care.

Mr. SMYSER. And they are attached to you?

Mr. BROWNING. Yes.

Mr. SMYSER. Do you treat them kindly?

Mr. BROWNING. I do.

Mr. SMYSER. From what you have observed, is the kind of treatment that you indulge in toward your patients the kind that is generally observed over there?

Mr. BROWNING. Well, I think it is.

Mr. SMYSER. What I mean by that is, generally the attendants are disposed to be kind toward the patients?

Mr. BROWNING. They are very kind—very.

Mr. SMYSER. Have you discovered since you have been there that kind treatment enables you to get along better with your patients?

Mr. BROWNING. I certainly have.

Mr. SMYSER. You ought to get married. [Laughter.]

Mr. BROWNING. I was thinking about it. [Laughter.]

The CHAIRMAN. When you do, let me know, sir, and I will either attend or send you a present.

Mr. BROWNING. All right; I certainly will.

The CHAIRMAN. You are going to vote for Mr. Hay in November, are you not?

Mr. BROWNING. I have not got a vote. We are not allowed to vote.

TESTIMONY OF JAMES E. TONER.

JAMES E. TONER, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Do you reside in the city of Washington?

Mr. TONER. Yes, sir.

The CHAIRMAN. Have you ever been employed in St. Elizabeth's?

Mr. TONER. Yes, sir.

The CHAIRMAN. When?

Mr. TONER. I have been employed there since 1881.

The CHAIRMAN. Are you there now?

Mr. TONER. Yes, sir.

The CHAIRMAN. And you have been there continuously since 1881?

Mr. TONER. I have been there continuously since 1881.

The CHAIRMAN. What are your duties there?

Mr. TONER. I am a supervisor in the detached buildings.

The CHAIRMAN. How many patients are there that you are responsible for?

Mr. TONER. 673 at present.

The CHAIRMAN. And how many attendants?

Mr. TONER. Well, attendants, night and day, 58. There are 58 attendants and nurses.

The CHAIRMAN. Are you the only supervisor?

Mr. TONER. No, sir; I have two assistants.

The CHAIRMAN. So that the staff there consists of yourself as supervisor, two assistant supervisors, and 58 attendants?

Mr. TONER. Myself, two assistant supervisors and 58 attendants.

The CHAIRMAN. Does that include night attendants, as well as day attendants?

Mr. TONER. Night attendants, female and male.

The CHAIRMAN. Are you responsible for the night attendants too?

Mr. TONER. No, sir; the night physician is responsible for them.

The CHAIRMAN. You say the night men are under you, too?

Mr. TONER. No, sir; the night physician has charge of them.

The CHAIRMAN. How long are you on duty?

Mr. TONER. Well, I go on duty in the morning at 6 o'clock and am on from 6 o'clock in the morning, one day, until 5 o'clock in the evening, and next day from 6 o'clock in the morning until 9 in the evening.

The CHAIRMAN. Your hours are the same as the hours of the attendants generally in the hospital?

Mr. TONER. Practically the same?

The CHAIRMAN. Do you go through all the wards that hold these 600 and odd patients you speak of?

Mr. TONER. Yes, sir; two or three times a day, and sometimes oftener than that, my assistant and others go through there.

The CHAIRMAN. Do you go through regularly twice a day?

Mr. TONER. Yes, sir; regularly. Well, I make one general round of inspection about 10 o'clock in the morning, and my assistant goes and makes a round about 9 o'clock. Then about half-past 1 o'clock we make another round, and then in the evening whichever supervisor is on duty makes a round about 7 o'clock to see that everything is in condition.

The CHAIRMAN. How many of these detached buildings have you?

Mr. TONER. Four. The first is a small building called Atkins Hall. That is where the supervisor has his headquarters. In that building there is 53 patients. The doors are open at 6 o'clock in the morning, and they are open from that until 8 o'clock in the evening, and then patients are on messenger work around the dining rooms and different places, and come in and out as they please. They just come into their meals.

So, particularly in the daytime, there is hardly anybody in the building at all. They go on duty as messengers and work in the dining rooms and different places around the grounds. Then we have the Allison group, which is the hospital department. There is 113 in that department. There is 21 nurses and attendants on duty, and there is 5 on duty at night and 16 on duty in the day. One of the buildings, a small building called the C building, is the tubercular department, and they are all practically bedridden cases in them Allison buildings. Then we have another large building called the Relief Building, which has 7 wards, and there are 310 patients in that building. In that building there is two of the wards for the epileptics. They are on the first floor. Then we have another building called the Home Building, a building that was built for the old soldiers. There is 4 wards, and there is 199 patients in that building, and 9 attendants and a watchman in that building. Then we have a large dining room connected to our kitchen, and in that dining room there is 477 takes their meals there three times a day.

The CHAIRMAN. Is that the dining room where there is a platform at one end?

Mr. TONER. Yes.

The CHAIRMAN. That is where the committee was?

Mr. TONER. Yes, sir; and in that dining room—it has been running about sixteen years—there has never been a meal served in that dining room without a supervisor at all times being in there, and if a patient becomes unruly he is never removed from the dining room without an order of the supervisor.

The CHAIRMAN. Either you yourself or one of your assistants goes over there to superintend it and see that the attendants properly take care of the patients?

Mr. TONER. Yes, sir; there never has been a meal served in that dining room without a supervisor there.

The CHAIRMAN. That is one of the regulations of the asylum?

Mr. TONER. Yes.

The CHAIRMAN. You have a separate kitchen?

Mr. TONER. We have a separate kitchen that joins right with the dining room. The bell rings and we have breakfast in the morning about half-past 6, dinner about 12, and supper about half-past 4. The tea is put in the pitchers and put around on the tables, the bell rings, and the patients come in and are seated. The food is brought right out of the kitchen and given to the attendants and the attendants serve it.

Mr. BARCHFELD. It is good and hot all the time?

Mr. TONER. It is good and hot all the time; yes, sir.

The CHAIRMAN. What do you think of the quality of the food, generally?

Mr. TONER. It is very good; very good. Sometimes there is lots of complaints. Sometimes some man wants his steak rare and sometimes some one wants it well done; but as a rule the food is very good.

The CHAIRMAN. When some man wants his steak rare and another man wants it well done, do you try to oblige them?

Mr. TONER. No, sir; we can not do it.

The CHAIRMAN. You just hand it around?

Mr. TONER. We just hand it around.

The CHAIRMAN. One right after the other?

Mr. TONER. One right after the other.

The CHAIRMAN. In other words, you do not think it would be a practicable thing to do it any other way?

Mr. TONER. No, sir; I do not.

The CHAIRMAN. What do you know about any cruelty? I am talking now particularly as to the last three years or the last two years and a half?

Mr. TONER. Well, sir, in the last three years I remember of but two occasions in the department I am in.

The CHAIRMAN. What were those cases?

Mr. TONER. One of them was a patient by the name of Frank Cullen, who was a very noisy and boisterous patient at times; and one evening the attendant on duty, a man by the name of Acton, he had a small piece of rubber pipe, I suppose about a foot and a half long, and he hit this patient across the eyes with this rubber pipe, and the next morning in the dining room I saw this man with his eyes blacked. I said to the head attendant, by the name of Groves, I asked him how did that man get his eyes, and he said "I don't know; he was all right when I went off duty at 5 o'clock." I said "You find out and report to me."

So the attendant came over about 8 o'clock and he said, "Well, I investigated that," he said, "and one of the patients over there told me that an attendant, Acton, had hit him with this pipe." I said, "Is that so?" He said "Yes." Well, I immediately left the office and went up onto the ward and investigated it. I went around and inquired among these patients, and I asked Acton if he had any trouble with this man. He said "No; I hadn't any trouble with him, but he wouldn't go to bed."

So I came down and I told the assistant physician, Doctor Hummer, and he brought the patient over to the marking room there, and we examined him, and he said "Leave him here until I see Doctor White." So he went over and saw Doctor White. Doctor White came immediately over and examined this man and questioned the attendant.

Doctor White sent Doctor Hummer and myself over to swear out a warrant for him. We went over to the police court and saw the assistant district attorney. I think it was Mr. Mullooney. He is a judge now. We swore out a warrant for him. The warrant was given to the Anacostia precinct, and Sergeant Anderson sent an officer up there, and he stayed there for three days trying to get this fellow, but he had got wind that we were going over to get the warrant and he skipped down into Maryland and we didn't get him.

The CHAIRMAN. He was discharged from the asylum, anyway, was he?

Mr. TONER. Oh, yes; he was discharged.

The CHAIRMAN. You made the criminal complaint, and of course then it went out of your hands entirely?

Mr. TONER. It went out of our hands. He went down into Maryland, and we couldn't very well get him. Of course we had an officer up there waiting for him.

The CHAIRMAN. Were there any other evidences of cruelty that you know of?

Mr. TONER. Yes, sir.

The CHAIRMAN. Where you had to make complaints against attendants?

Mr. TONER. Yes, sir; we had another case.

The CHAIRMAN. How long had this man Acton been in the hospital; do you know?

Mr. TONER. He had been there about a year and a half.

The CHAIRMAN. Where did he come from?

Mr. TONER. He came from Maryland.

The CHAIRMAN. Tell us any other instance. You did not name the fourth building in your group. You only named three of them.

Mr. TONER. The first one is Atkins Hall, the second one was Allison, the third was the relief building, and the fourth was the home building.

The CHAIRMAN. Go ahead and tell us about the other case.

Mr. TONER. The other attendant was an attendant by the name of Barnes. About a year ago there was one of the patients in the morning who helped to work around the dining room, he came to me and his eye was discolored. He said "Mr. Toner, look at my eye." I said "What is the matter with your eye?" He was a German fellow. He said "That fellow hit me." I said "What fellow hit you?" I thought it was some of the patients. He said "That attendant," meaning Barnes. He was serving breakfast there. I said "He hit you?" He said "Yes, I had some trouble down in the wash room. He wanted me to get out of the way, and he shoved me, and I grabbed him, and he hit me." I said "Is that so? As soon as I see Doctor White, I am going to have him arrested." That was about 7 o'clock, and I went over to the office about 9 o'clock and I told the assistant physician about it. When I came over to look after this fellow, he had left his keys with another attendant and skipped out. So I think in about six weeks, or something like that, he come back and got what money was due him.

The CHAIRMAN. He was discharged?

Mr. TONER. Yes, sir; he was.

The CHAIRMAN. Were men discharged whenever any cruelty was found out toward patients?

Mr. TONER. Undoubtedly. In every instance since I have been in that hospital, whenever a man was guilty of cruelty, he was immediately dismissed. He was dismissed for harsh words.

The CHAIRMAN. That has been the general practice?

Mr. TONER. The general practice, yes, sir. Any attendant that is employed in there, he is told harsh words is as much out of place as clubs. He is instructed as to that.

The CHAIRMAN. Who instructs the attendants?

Mr. TONER. The supervisor. I do.

The CHAIRMAN. And that is in accordance with regulations given you when you are appointed supervisor?

Mr. TONER. Yes, sir.

The CHAIRMAN. You notify the attendants that not only must there be no cruel treatment, but they must not use harsh words.

Mr. TONER. Yes, sir; that they are as much out of place as clubs. That is the way I have instructed them. Every man I have put to work will tell you the same, and my assistants has given them the same instructions.

The CHAIRMAN. What about the clothing of the institution, Mr. Toner? Is that pretty good?

Mr. TONER. We have good clothing; yes, sir; good clothing.

The CHAIRMAN. Did you ever know of a case where they did not provide summer underclothing?

Mr. TONER. Oh, yes, sir. There is quite a number of our men that won't wear any light underwear at all; that won't wear nothing but one shirt. You take these thin light undershirts, they won't wear them at all. Then again there is some that wants them. We have got some light-weight undershirts, and we have had a requisition in for some, but we haven't got any. Some of them wanted drawers, too, but we haven't ordered any for them; but there is very few of the men that asks for them but gets them. Very few of the men want to wear any undershirt at all. They just wear the blue cotton shirt, you know—just one shirt.

The CHAIRMAN. That is in the summer time?

Mr. TONER. In the summer time, yes, sir. In the winter time every man has the very best of canton flannel undershirt.

The CHAIRMAN. And drawers, too?

Mr. TONER. And drawers, too. There is no finer.

The CHAIRMAN. Did you ever have any patients or friends of patients make complaints to you that you did not immediately investigate?

Mr. TONER. No, sir; never; and I could give you the names of any number of patients over there who has been there twenty, fifteen, twelve years, and their friends speak in the highest terms of the way their friends is treated over there.

The CHAIRMAN. What were the instructions that were given to you when you were appointed supervisor? Were they given in writing?

Mr. TONER. No, sir; they was not. When I was made supervisor—

The CHAIRMAN. When did you say you were made supervisor?

Mr. TONER. In 1886.

The CHAIRMAN. You have been supervisor ever since, have you?

Mr. TONER. Yes, sir; since 1886.

The CHAIRMAN. Were any instructions given to you since Doctor White became superintendent in regard to your duties there?

Mr. TONER. No, sir.

The CHAIRMAN. Because you were already supervisor?

Mr. TONER. Yes, sir.

The CHAIRMAN. Tell us what your instructions were when you first went there.

Mr. TONER. When I was made supervisor under Doctor Godding, the man that was supervisor, that I taken his place, Mr. Green, was made farm steward of the hospital, and of course I just had orders to go over and take general charge over there and see that the patients were well cared for, that they had clothing, that they wan't abused, or anything, or any details like that, to see that the men went out walking, that the wards was properly cleaned, and the bed linen aired, and things of that kind. I must say, gentlemen, in the department I am in I haven't seen but one man that has testified so far. A fellow by the name of Lloyd Green was the only man employed over there that I have heard testify.

TESTIMONY OF J. H. C. TAYLOR.

J. H. C. TAYLOR, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Are you an attendant, Mr. Taylor, at St. Elizabeth's now?

Mr. TAYLOR. Yes, sir.

The CHAIRMAN. How long have you been there?

Mr. TAYLOR. I first went there in 1897.

The CHAIRMAN. Have you been there continuously since?

Mr. TAYLOR. I have not been there continuously. I stayed there four years. I went there on the 15th day of November, 1897, and left on the 15th day of November four years following, in 1901.

The CHAIRMAN. You have been there ever since?

Mr. TAYLOR. No; I was away then from that time, the 15th of November, 1901, until the 20th of April, 1903. I have, altogether, worked over seven years in the hospital.

The CHAIRMAN. But you have been there continuously now since April, 1903, have you?

Mr. TAYLOR. I was; yes, sir.

The CHAIRMAN. What are your duties over there?

Mr. TAYLOR. My duties are attendant in charge of the tubercular ward in Howard Hall department.

The CHAIRMAN. That is where the criminal insane are?

Mr. TAYLOR. No, not in my ward. I belong to that department, but I am not in the Howard Hall building. There are three or four buildings in that group, known as the Howard Hall department.

The CHAIRMAN. What is the average number of patients in your ward?

Mr. TAYLOR. In my ward?

The CHAIRMAN. Yes.

Mr. TAYLOR. There is only nine in my ward. I have only had charge of this ward for the past two weeks. I formerly had charge of another ward.

The CHAIRMAN. What was the other ward?

Mr. TAYLOR. The other ward was the East Lodge 3.

The CHAIRMAN. Did you ever serve on a ward with Edgar Ball?

Mr. TAYLOR. I did, in 1899.

The CHAIRMAN. Not since then?

Mr. TAYLOR. Not since that time, only for about two months. That was in Doctor Godding's administration. I never served in the department with him. This present time that I have been in the hospital he served in a different department from me.

The CHAIRMAN. Do you know anything about any cruelty to patients over there?

Mr. TAYLOR. I do not.

The CHAIRMAN. Did you ever hear of any such thing?

Mr. TAYLOR. I might have heard of such things, but I never saw it. I couldn't speak for what I heard, only from what I saw.

Mr. SMYER. From what you heard, was it generally or only occasionally you would hear about it?

Mr. TAYLOR. I have probably heard of such things. I have known of instances where attendants were discharged for cruelty to patients. I have heard so in that way. I know that on my ward there was no cruelty practiced towards patients. This present ward that I have, I have only been on it for two weeks.

The CHAIRMAN. But I am talking about the ward before that?

Mr. TAYLOR. The ward before I had charge for over three years. In fact, I took charge of the ward in ten days after I went there.

The CHAIRMAN. Were any charges made during that three years?

Mr. TAYLOR. Against my ward?

The CHAIRMAN. Yes.

Mr. TAYLOR. Never against my ward, or any ward I was on during my time of service in the hospital.

The CHAIRMAN. Did you often have to use the strait-jacket in your ward?

Mr. TAYLOR. I never used the strait-jacket on my ward. I have had to use restraint once or twice in the course of three years.

The CHAIRMAN. What restraint?

Mr. TAYLOR. We used a strap with a cuff on it where a patient was violent and fighting and uncontrollable by the attendants; but that was a very rare occurrence, because on this ward where I was the patients were fairly good. In fact, all of them worked out during the day.

The CHAIRMAN. All of them what?

Mr. TAYLOR. All of them worked out on the grounds, and it was rarely necessary to do anything of the kind. As well as I can recollect, it has been fully eighteen months since anything of that kind has been used.

The CHAIRMAN. On the rare occasions when you knew of the straps being put on, was that done by the direction of the physician?

Mr. TAYLOR. Certainly.

The CHAIRMAN. You never would do it without receiving instructions?

Mr. TAYLOR. Oh, no. If I had a patient who was unruly and could not be controlled by the attendants, I would report the matter to the supervisor in charge of the department. He would go to the physician and then come back to me and tell me what to do with the patient. On the ward I was on, as a general thing, when patients became so unruly they were transferred to other wards. They were not kept with the class of patients that I had.

The CHAIRMAN. Do you know anything about toweling the patients, that has been talked about?

Mr. TAYLOR. I have heard it used very often, but I never had anything of the kind.

The CHAIRMAN. Putting a towel around the neck of a patient and choking him, twisting him?

Mr. TAYLOR. I have seen it quite often in the papers, and I have heard it talked about, but I never had anything of that kind.

Mr. SMYSER. Did you ever see an actual photograph of it over in the institution?

Mr. TAYLOR. No, sir; I never saw a photograph of it.

Mr. SMYSER. Or the thing itself?

Mr. TAYLOR. No.

The CHAIRMAN. Do you know anything about choking a patient by an attendant putting his knee in the small of his back?

Mr. TAYLOR. No; I do not. I say there was no cruelty practiced on the ward I had charge of.

Mr. SMYSER. Of any kind?

Mr. TAYLOR. Of no kind. The patients were kindly treated by the attendants. It was very rarely that we ever had to use force. As I have stated to you, I believe the last case on my ward where it was necessary was about eighteen months previous to this present time.

The CHAIRMAN. What have you to say about the food there?

Mr. TAYLOR. That is a right hard question to answer, but the food varies in the hospital. It is not the same in all departments. That is, I mean in this way: The food I believe to be sound and good when it comes into the hospital, but I mean in regard to the cooking of it.

The CHAIRMAN. In other words, sometimes you have a good cook and sometimes a bad one?

Mr. TAYLOR. No; I think we generally had a bad one.

Of course in the hospital, where they had a smaller kitchen, where it supplied one or two buildings, the food, as I understood, though I did not see it, was well cooked; but the ward I was on and where I ate in the dining room mine was served from what they call the general kitchen, and that general kitchen, up to a few months ago, supplied two departments of the hospital—in fact, does supply two departments with the exception of one building now. On the ward where I am at present I think the food is the best that is served in the whole department, and it is very good, excellent. It is well cooked, and cooked entirely different from what it is in some others.

The CHAIRMAN. That is, in the tubercular ward?

Mr. TAYLOR. In the tubercular ward.

The CHAIRMAN. The tubercular patients get more milk and more eggs, do they not?

Mr. TAYLOR. For the 9 patients I think I get about 2 gallons of milk a day. I think that is an ample quantity; but my food that I eat myself is cooked in the same kitchen, and it is nothing like I would get on my ward.

Mr. SMYSER. Is yours so much better?

Mr. TAYLOR. No; it is much worse. I will say that as a general thing we get a fairly good breakfast. It is palatable, and it is generally right well cooked; but the dinner is not generally well cooked, and there might be a greater variety in the food. I think there is too

much sameness about it. A man becomes tired of eating the same dishes over and over again.

The CHAIRMAN. That is all, Mr. Taylor.

Mr. TAYLOR. Gentlemen, there is one thing. I don't know whether you are just investigating the cruelty to patients.

The CHAIRMAN. We are examining into everything in regard to the hospital. If there is anything you have that you think will be of advantage to the committee, go on?

Mr. TAYLOR. I want to speak about the length of hours the attendants have to work. I think they are unusually long, and I don't really believe that they have been properly explained to this committee. I have never seen it in any testimony. It seems to me the general statement to this committee has been that attendants work from 11 to 14 hours a day. I think that is incorrect. While we are actually on duty on the ward that time we really work 43 hours out of 48. There is only 5 hours during the 48 hours that we can call our own to do with as we please. While we can go to sleep and sleep all night, we have not the privilege of leaving the ward except on some few wards, where they have hospital wards the men are allowed out. On the ward I am at present I am allowed out from 8 to 10 o'clock on the night I am on duty; but I have only had that ward the past two weeks. Previous to that I never left my ward, in three years, except from 5 or half past 5 in the evening until 10 o'clock every other evening.

The CHAIRMAN. How often did you have half days off?

Mr. TAYLOR. We had one-half a day each week, or we could take one whole day and two half days per month. We had every third Sunday.

The CHAIRMAN. And every third holiday?

Mr. TAYLOR. And every third holiday; yes, sir.

The CHAIRMAN. Do you mean to say on general days, when you were through your work at 5 o'clock on one day and 8 o'clock another, you could not go out of the grounds?

Mr. TAYLOR. I say that was the only time we could call our own, that we could do as we pleased with, the time we went off, from 5 or half past 5 in the evening whenever supper was over. We then could go where we pleased.

The CHAIRMAN. Until 10 o'clock?

Mr. TAYLOR. Until 10 o'clock; that is by getting permission to leave the reservation.

The CHAIRMAN. Could you do that every day?

Mr. TAYLOR. We could only do it every other evening.

The CHAIRMAN. I understand that. The other evenings you could do what you pleased between 8 and 10, could you not?

Mr. TAYLOR. I say on some wards, the hospital wards, where there were night men to take your place, some of the men were allowed the privilege of going. That is, where there was two men on duty on that ward at night, one would be allowed the privilege and the other one would be required to stay on with the night man, or, rather, stay on the ward. He went to his room. He was not required to perform any duty unless called upon, which would not likely happen.

The CHAIRMAN. Do you sleep in a general dormitory?

Mr. TAYLOR. No, sir; I have a private room.

The CHAIRMAN. Do you have a room to yourself?

Mr. TAYLOR. I have never slept in a dormitory. I always slept on the ward with the patients. The most I had was three attendants in a

room, and that was only a short time; generally two. In fact, I only had two attendants on the ward with me.

Mr. HAY. How many people had you under your control when you only had three attendants?

Mr. TAYLOR. I had different numbers.

Mr. HAY. What was the average?

Mr. TAYLOR. At the time I left this ward to take charge of the tubercular ward the capacity of the ward was 40. I was one or two men short, but as a general thing it was up to the capacity. I had two attendants.

Mr. HAY. But these men were men who went out during the day?

Mr. TAYLOR. I think the class of men I had, with two attendants, if they had been kept on the ward all the time, are amply sufficient to take charge of that class of men. You know you can't regulate those things—to have the same number of patients to each attendant. Where they are more violent you have to have more attendants, and where they are sick they require more attention, and where they are straighter and not easily disturbed patients it requires less attendants.

Mr. HAY. Do you think the long hours there impair the usefulness of the attendants?

Mr. TAYLOR. I do. I think this, that a man is liable to become irritable from being so constantly on duty. We don't have to work all that time, mind you, but we have the care and responsibility of those patients during that time, and I think that has a tendency to it.

Mr. HAY. What do you think ought to be done? Do you think you ought to have an eight-hour shift? Is that your idea?

Mr. TAYLOR. I can't say what ought to be done. I can say that I think it would be more satisfactory to the employees, and I think you would get better service from the employees.

Mr. HAY. If you had an eight-hour shift?

Mr. TAYLOR. Yes; but of course I don't know that you could expect that all at once. Have you done with that question?

Mr. HAY. Yes.

Mr. TAYLOR. There is something else I want to speak about. That is the instability of the force in the hospital. The force is not stable. It is continually changing from time to time. I think I would be safe in saying that counting from the time I first went into the hospital work, I don't think there is over 25 male employees that are there now that were there when I first went there.

That is, when I speak about male employees I speak about men who are employed in the work of caring for patients. I am not speaking of outside help. Of course there may be a good many of those. I don't think the inducement is great enough to keep the majority of the employees in the hospital. A good many of them come there because they want to come to Washington and look for something else, and then it is a good place to stop, and they come over there. I don't say the administration of the hospital is to blame for that at all. I don't think he is. I think he is handicapped in that respect, and I think if the inducement was greater to the attendants in the way of time, and the emolument was greater, we would get a better class of men.

Mr. HAY. What is your pay? What do you receive?

Mr. TAYLOR. I receive \$35.

Mr. HAY. And your board and lodging?

Mr. TAYLOR. Yes. I will receive more pay soon, because I have passed the final examination as a trained nurse, and I suppose when I graduate, in a short time, I will get more pay.

Mr. WALLACE. Just a while ago, you referred to the fact that you had found nothing on the number of hours of the day that you should be employed, in the testimony anywhere. I wish to refer you to a letter from the superintendent of the institution at Peoria, Ill., in connection with Doctor Clark's testimony, taken two or three days ago, and request you to read it. That was on the eight-hour system.

Mr. TAYLOR. I meant in regard to testimony offered by witnesses from the hospital. I don't mean from outside parties.

Mr. WALLACE. You do not mean this testimony?

Mr. TAYLOR. No; I mean what I have seen, because I haven't read that.

Mr. WALLACE. You will get to see it. It will be published.

Mr. TAYLOR. There is one statement I want to correct, made by a witness yesterday evening. I believe the witness was J. H. Lloyd. He was asked a question in regard to a diary that he kept. He stated he lost it, but he said this thing had been brought up before the Hospital Attendants' Union, and I think he left the impression that the Hospital Attendants' Union were in the habit of instructing their members to do such things—keep diaries of things occurring in the hospital.

Mr. SMYER. Oh, no; he stated that he and two or three other members suggested it would be a good thing to do that.

The CHAIRMAN. It was not adopted.

Mr. TAYLOR. I want to say this, that no suggestion of that kind was ever adopted by the Hospital Attendants' Union.

The CHAIRMAN. That is exactly what Mr. Lloyd said.

Mr. TAYLOR. And it would not be. I was under the impression that the impression was conveyed that the Hospital Attendants' Union was opposed to the Superintendent. Our relations as an organization have always been friendly with the present administration. We have on several occasions sent committees to the Superintendent in regard to little differences we may have, and he has always treated us with due courtesy and given us plenty of time to explain, and I think our relations have been friendly, and I think you will find among the Hospital Attendants' Union members the very best employees in that hospital.

Mr. BARCHFELD. You are a member of the Hospital Attendants' Union?

Mr. TAYLOR. I am a member of it.

Mr. BARCHFELD. How many members have you in that association?

Mr. TAYLOR. I couldn't state. I don't know.

The CHAIRMAN. We have a list of them here. We have a list of all the attendants of the hospital.

Mr. BARCHFELD. What position do you hold in the organization?

Mr. TAYLOR. I am a member, and I am the secretary of the organization.

Mr. BARCHFELD. And you belong to the Federation of Labor?

Mr. TAYLOR. Of course the organization is affiliated with the Federation.

Mr. BARCHFELD. That is very praiseworthy.

Mr. TAYLOR. Gentlemen, I just wanted to state this: This organization took no part in this fight. It has never taken part in a fight against the Superintendent. It is true such things have been done, but they have never had the indorsement of our organization. We are just as much interested in the welfare of that institution as anybody else connected with it. It is true we try to better conditions for the employees of the hospital in trying to get a reduction of hours and to get increased pay if we can. We think it is our just due, but we intend to appeal to the reason and common sense of men, rather than to resort to some of the means that have been used there.

Mr. BARCHFELD. Have you a representative at these hearings?

Mr. TAYLOR. At these hearings?

Mr. BARCHFELD. Yes.

Mr. TAYLOR. No, sir.

Mr. BARCHFELD. Why have you not?

Mr. TAYLOR. We don't care to have.

The CHAIRMAN. That is all. That was the same understanding we had from Mr. Lloyd. There was no impression gathered in my mind except that Mr. Lloyd had offered a resolution which had not been carried. That was all there was about it. We are very glad to have the statement.

The committee, at 4.25 o'clock p. m., adjourned until Monday, May 28, 1906, at 2 o'clock p. m.

HOUSE OF REPRESENTATIVES, *May 28, 1906.*

The committee met at 2 o'clock p. m.

Present: Messrs. Smyser (acting chairman), Barchfeld, Hay, and Wallace; also, Dr. William A. White, Mr. Richard P. Evans, Hon. Frank Clark, and Mr. Stuart McNamara.

TESTIMONY OF MILTON R. GRIFFIN.

MILTON R. GRIFFIN, being duly sworn, was examined, and testified as follows:

The ACTING CHAIRMAN. What is your name.?

Mr. GRIFFIN. Milton R. Griffin.

The ACTING CHAIRMAN. Where do you reside, Mr. Griffin?

Mr. GRIFFIN. 141 D street SE.

The ACTING CHAIRMAN. What is your business?

Mr. GRIFFIN. I am in the Agricultural Department.

The ACTING CHAIRMAN. An employee of the Department?

Mr. GRIFFIN. Yes, sir.

The ACTING CHAIRMAN. How old are you?

Mr. GRIFFIN. 38 years old.

The ACTING CHAIRMAN. Mr. Griffin, your mother is an inmate over at St. Elizabeth's?

Mr. GRIFFIN. Yes, sir.

The ACTING CHAIRMAN. Were you instrumental in having her placed there?

Mr. GRIFFIN. Yes, sir.

The ACTING CHAIRMAN. Why?

Mr. GRIFFIN. Because we could not manage her at home.

The ACTING CHAIRMAN. What was the problem?

Mr. GRIFFIN. She was disturbed for several weeks. She first was attacked with insomnia, and the physicians could not do anything for her whatever. They had exhausted their skill, and we could do no more than place her there for treatment.

The ACTING CHAIRMAN. And before she was taken there who took care of her? Who looked after her at home?

Mr. GRIFFIN. My two sisters were there with her.

The ACTING CHAIRMAN. Do you know anything about her having fractured ribs?

Mr. GRIFFIN. Yes, sir; I heard of it at the time—that is, shortly afterwards—that her ribs were fractured; but when and how, that is a question I don't think can ever be definitely answered, because during the period of my mother's attack at home it was impossible to control her, and my sisters were up day and night for several days. Of course the doctors were treating her all the time. We were in hopes that her condition would improve, so that we would not have to take her to St. Elizabeth's, but her condition continued growing worse, and for several nights previous to this time of her being taken to St. Elizabeth's they had to stay up night and day with her. Now, whether the fracture occurred at the house is a question. I don't think nobody will ever be able to answer where it occurred—that is, definitely.

The ACTING CHAIRMAN. Have you visited her over at the hospital?

Mr. GRIFFIN. Yes, sir; I have been going there regularly since she has been there, every Sunday, with the exception of the time I was off on leave and out of the city.

The ACTING CHAIRMAN. How was she treated over there, if you know?

Mr. GRIFFIN. I have no complaint to make. I am only grateful to Doctor Clark for his kindness to her and his attention.

The ACTING CHAIRMAN. Did you ever see any evidences of cruel treatment?

Mr. GRIFFIN. No, sir.

The ACTING CHAIRMAN. Either toward your mother or any other patient?

Mr. GRIFFIN. No, sir. I always go between the hours of 10 and 12, and I have never seen any ill treatment.

The ACTING CHAIRMAN. Do you know anything of your mother having had falls before she was taken over there?

Mr. GRIFFIN. I couldn't say. I don't know whether she had a fall or not. She may have had one and I didn't know anything about it, but not that I remember of. Of course, as I told you awhile ago, she was pacing the floor day and night, and it was almost impossible to govern her without severe means, and of course my sisters did not attempt anything of that kind.

The ACTING CHAIRMAN. They were very much opposed to putting her over there, I suppose?

Mr. GRIFFIN. Very much so; but it was the only thing that could be done. I thought by putting her over there it would be a good scheme to restore her to her normal condition.

The ACTING CHAIRMAN. You had no other purpose in view?

Mr. GRIFFIN. No, sir.

The ACTING CHAIRMAN. One of your sisters is married now?

Mr. GRIFFIN. Yes, sir.

The ACTING CHAIRMAN. Did she come to see you on the occasion of her last visit here?

Mr. GRIFFIN. She was at the house, but I didn't see her. I was at the office.

The ACTING CHAIRMAN. Did you know anything about the fracture of the hip that the old lady received over there?

Mr. GRIFFIN. Yes, sir; I know this much, that my mother was always kind and good, and even in her affliction she was taking a blanket down to cover up some poor soul that was hollering and complaining of the cold; and I think one of the nurses told me that she tripped and fell. I think it was unavoidable. It could not have been avoided at all, sir.

The ACTING CHAIRMAN. So far as you are concerned you never saw anything improper by way of treatment?

Mr. GRIFFIN. I never have since I have been going there, sir. There was only one thing I thought ought have been done there or should have been done. That is, to have something on the floors for those that are able to walk around. The floors are oiled, and of course it makes it very slippery; but at the same time I don't think that was the cause of my mother's falling, because she had been walking around regularly all the time; but if she had not had the blanket I am sure she would never have fallen.

Mr. HAY. You say she had this blanket. Who told you about that?

Mr. GRIFFIN. One of the nurses. I couldn't tell you which one, because I am not acquainted with any of them.

Mr. HAY. She was taking the blanket, according to the statement, to some other patient?

Mr. GRIFFIN. From what I understand, yes. I was over there one Sunday, and one of the patients was making a noise, and she said she thought she was cold, and she went then to get a blanket and started to carry it down to put it over her.

Mr. HAY. Have you ever talked to Mrs. Cole or your other sister about how your mother was treated out there?

Mr. GRIFFIN. I have talked to them some, but in a general way.

Mr. HAY. Only in a general way?

Mr. GRIFFIN. Yes, sir.

Mr. HAY. What do you mean by only in a general way? Did they ever make any specific complaints to you as to the treatment she had received?

Mr. GRIFFIN. They have made complaints in some respects, but she told me she saw Doctor Clark.

Mr. HAY. Who told you that?

Mr. GRIFFIN. My sisters, and that he had always rectified mistakes any one made, and was always glad to do it for them.

Mr. HAY. Who was that, Doctor Clark?

Mr. GRIFFIN. Doctor Clark; yes, sir.

Mr. HAY. They did not give you any details as to the cruel treatment that they complained of here?

Mr. GRIFFIN. I have heard them say something about cruel treatment, but then I can't answer only for what I see myself.

Mr. HAY. I understand that; but I want to know whether they told you what they told here.

Mr. GRIFFIN. That is what I don't know. I know what they told here, you see.

Mr. HAY. They said among other things that she was bruised very much.

Mr. GRIFFIN. She may have been bruised. I remember on one occasion she was bruised, but the nurses told me it came from her forcing her hands through a window there. Her hand was injured for some little time. That is, it was hurt, bruised; but other bruises, I didn't see those. When my mother was first taken there, I thought it best not to visit there too frequently on account of her condition at that time. As she improved, then I commenced to go oftener.

Mr. HAY. When were you informed she had fractured the ribs?

Mr. GRIFFIN. I couldn't tell you the date and the day.

Mr. HAY. How long after she had been there?

Mr. GRIFFIN. I couldn't even tell you that. It might have been a radius of two or three weeks; I couldn't say.

Mr. HAY. Two or three weeks?

Mr. GRIFFIN. I couldn't remember. I don't know.

Mr. HAY. Who informed you of it?

Mr. GRIFFIN. My sisters came to the house and informed us.

Mr. HAY. That was the first time you heard of it?

Mr. GRIFFIN. That was the first time; yes, sir. It might have been a shorter time than that. I couldn't tell you.

Mr. HAY. Then you were not informed by Doctor White or Doctor Clark or anybody else at the hospital that the ribs were fractured?

Mr. GRIFFIN. No, sir. Doctor Clark asked me if I had received a message, but I told him no. There was one sent, but I didn't receive it; but I did receive the message as to the fracture of the leg from Doctor Hough.

Mr. HAY. The same day?

Mr. GRIFFIN. He telephoned the same day that my mother had received an injury, but just at that time he couldn't tell me how serious it was, so I went over that afternoon.

Mr. HAY. Who was that?

Mr. GRIFFIN. Doctor Hough.

Mr. HAY. Was Doctor Hough at that time at the asylum?

Mr. GRIFFIN. Yes, sir.

TESTIMONY OF DR. I. W. BLACKBURN.

Dr. I. W. BLACKBURN, being duly sworn, was examined and testified as follows:

The ACTING CHAIRMAN. Doctor, what is your name?

Dr. BLACKBURN. I. W. Blackburn.

The ACTING CHAIRMAN. Doctor, you are connected with St. Elizabeth's Hospital?

Dr. BLACKBURN. Yes, sir.

The ACTING CHAIRMAN. For how long?

Dr. BLACKBURN. Nearly twenty-two years.

The ACTING CHAIRMAN. During that time, as a physician?

Dr. BLACKBURN. As a pathologist at the institution.

The ACTING CHAIRMAN. Has that been your position ever since you have been there?

Dr. BLACKBURN. Yes, sir.

The ACTING CHAIRMAN. How old are you, Doctor?

Dr. BLACKBURN. Fifty-four.

The ACTING CHAIRMAN. Are you a graduate of any medical institution?

Dr. BLACKBURN. The University of Pennsylvania.

The ACTING CHAIRMAN. Had you ever served in that capacity or been connected with any other institution like this before?

Dr. BLACKBURN. No, sir.

The ACTING CHAIRMAN. You were there under Drs. Godding, Richardson, and White?

Dr. BLACKBURN. Yes, sir.

The ACTING CHAIRMAN. Doctor, I wish you would briefly describe what your duties are.

Dr. BLACKBURN. I was appointed to the duties of pathologist, and I understood by that the making of post-mortem examinations and the study of the tissues with the microscope, with the object of studying the causes of lesions produced by mental disease, as nearly as I could define them.

The ACTING CHAIRMAN. Have you done that?

Dr. BLACKBURN. Yes, sir.

The ACTING CHAIRMAN. Take the autopsies. You conduct them, do you?

Dr. BLACKBURN. Yes, sir.

The ACTING CHAIRMAN. Who assists you, since Dr. White has been there?

Dr. BLACKBURN. I have an interne assisting me, since Dr. White has been there.

The ACTING CHAIRMAN. What is his name?

Dr. BLACKBURN. The present interne is Dr. H. Butts.

The ACTING CHAIRMAN. What class of patients who die there do you hold autopsies on?

Dr. BLACKBURN. We make autopsies, or hold autopsies, on those unclaimed by their friends or relatives, and those on whom we get special permission to perform the autopsies. I do not recall any other restrictions.

The ACTING CHAIRMAN. Do you endeavor to hold autopsies wherever you can?

Dr. BLACKBURN. Yes, sir; that I consider my duty.

The ACTING CHAIRMAN. For what purpose?

Dr. BLACKBURN. For the purpose of studying the lesions produced by mental disease, and which have caused mental disease, as well as other diseases incidental to the cases.

The ACTING CHAIRMAN. What record, if any, do you keep of your autopsies?

Dr. BLACKBURN. We keep records of every case.

The ACTING CHAIRMAN. Are they filed there?

Dr. BLACKBURN. Yes, sir; they are filed in the institution.

The ACTING CHAIRMAN. To whom do you make report?

Dr. BLACKBURN. We make no regular report except to the physician at the time of the operation. The records are kept on file in the laboratory.

Mr. HAY. What do you mean by the physician at the time of the operation?

Doctor BLACKBURN. That is the physician who has been in charge of the patients. I always report to the physician what has been found at the autopsy.

The ACTING CHAIRMAN. Are your duties prescribed for you?

Doctor BLACKBURN. No, sir; not distinctly.

The ACTING CHAIRMAN. Are any of them outlined in writing?

Doctor BLACKBURN. No, sir; they never have been that I know of. When I was appointed I received letters from the superintendent stating what my duties would be, which I have tried to give you; but beyond that I know of nothing, unless you allude to the letter issued sometime ago. That I did not think of. During Doctor Richardson's administration a circular was issued to the members of the staff, and that specified my duties. I did not understand that at first, what you meant by it.

The ACTING CHAIRMAN. Have you any such letter from Doctor White?

Doctor BLACKBURN. When Doctor White first took charge of the institution, I submitted this letter to him and received his verbal approval, and since that I have acted upon that.

The ACTING CHAIRMAN. Have you that letter?

Doctor BLACKBURN. Yes, sir.

The ACTING CHAIRMAN. You might as well produce it, Doctor. Suppose you read it.

Mr. HAY. Or that part of it pertaining to your own duties.

Doctor BLACKBURN. It is as follows:

GOVERNMENT HOSPITAL FOR THE INSANE.

To members of the medical staff:

It is requested that the following regulations be observed:

1. In every case of death a synopsis of the medical history shall be at once prepared on the blanks furnished for that purpose, and transmitted to the pathologist, together with the diagnosis of the last illness and the cause of death.

2. Autopsy shall be required in every case unless such objection is made by the friends as will render it inadmissible. Autopsy must be made as promptly as possible and always within the time required by law.

3. The pathologist will report immediately after the autopsy both the primary and the immediate cause of death on the blank prepared for the purpose, and this shall be filed, *with the other portions of the history of the case*, in the general office at once by the physician or supervisor in whose charge the patient was at the time of death.

4. The physician will not make out the death certificate in any case in which autopsy is ordered, until the report of the pathologist of the cause of death has been received.

5. It is preferred that whenever a physical basis for disease is shown by the autopsy, the same should be given in the death certificate rather than the symptomatic name; e. g., cerebral hemorrhage rather than "apoplexy;" e. g., thrombosis of coronary artery rather than "angina pectoris."

6. In every case of suspected malaria report shall be at once made to the pathologist and a specimen of the blood obtained *before* the administration of antimalarial remedies, and sent immediately to the laboratory.

7. In all cases of suspected tuberculosis it will be the duty of the physician in charge to see that sample of the sputum is obtained at the earliest opportunity and that it is transmitted in good condition to the pathologist.

8. In every case in which typhoid fever is suspected report shall be at once made to the pathologist by the physician in charge and no diagnosis made until his report has been received. Care must be used by those in charge of the patient in procuring such specimens of blood as the pathologist may require.

9. It is especially impressed upon the medical staff that a sample of urine shall be sent to the pathologist in every case admitted, and if possible within 24 hours of admission, whether the primary examination has been then made or not. It is also requested that the physicians avail themselves of the opportunity to secure further urinalyses by sending

specimens in every case of illness in which the diagnosis is in doubt, or when any symptoms point to renal disease.

10. In all cases of clinico-pathological examination the blank furnished for the purpose must be made out and sent with the specimen, and the report of the pathologist on the case must be filed with the clinical records.

A. B. RICHARDSON, *Superintendent.*

The ACTING CHAIRMAN. Is there a time fixed by law within which autopsies must be held?

Doctor BLACKBURN. I know of no such time, sir, except the requirement that the certificate must be sent in within 48 hours, I think. I think that is what that item referred to.

The ACTING CHAIRMAN. That is what that alluded to, then?

Doctor BLACKBURN. Yes, sir; I think so.

The ACTING CHAIRMAN. How soon after death do you hold your autopsy?

Doctor BLACKBURN. At variable periods, depending upon the necessities of the case, so far as I could explain. Some occasions arise when we have to make them quite early.

The ACTING CHAIRMAN. Why?

Doctor BLACKBURN. When the body is in a very bad state of preservation, when the friends require that the body shall be turned over to an undertaker, and give permission for an autopsy. We have cases of that sort; and then, above all, I think an early autopsy is by all means most reliable, so far as the pathologist is concerned, in formulating his opinions, especially for the study of mental disease.

The ACTING CHAIRMAN. Why so?

Doctor BLACKBURN. Because the tissues deteriorate or decompose very rapidly after death, and it is the received opinion that autopsies should be made to study mental diseases as early as possible.

The ACTING CHAIRMAN. Is that simply the opinion of that institution, or is it the opinion of the profession in the autopsies of this class of cases?

Doctor BLACKBURN. That is the opinion of the profession.

The ACTING CHAIRMAN. Are there any cases out there where you have been unduly in a hurry to hold an autopsy?

Doctor BLACKBURN. I think not, sir. I submitted the report of 100 cases to the superintendent, and I think out of the hundred there were not more than five which were quite early, say even three hours, and I believe almost every case could be explained by some good reason—of those five.

The ACTING CHAIRMAN. One of the things charged against you is that you are cutting people up out there within three hours after death. We are curious to know whether they were dead, or whether you are the fellow who killed them.

Doctor BLACKBURN. In most of the cases examined three hours after death, I think there could have been little question that the patient was dead.

The ACTING CHAIRMAN. Was there any doubt in any case, Doctor?

Doctor BLACKBURN. No, sir.

The ACTING CHAIRMAN. In these particular cases, was there any reason for an early autopsy?

Doctor BLACKBURN. In these particular cases?

The ACTING CHAIRMAN. Yes.

Doctor BLACKBURN. Yes, sir.

The ACTING CHAIRMAN. Briefly, what were the reasons?

Doctor BLACKBURN. In one I recall——

The ACTING CHAIRMAN. You may give the name if you recall the patient.

Doctor BLACKBURN. I can not give the name of the patient. It was a case of carcinoma of the uterus. The autopsy was done while the pathologist was on his vacation; but I was responsible for it. The body was in an extremely bad condition and it also had to be taken away by an undertaker, and it was deemed advisable to make the autopsy as soon as possible.

The ACTING CHAIRMAN. Is there any other case that you have in mind?

Doctor BLACKBURN. No; I do not recall any other case, except one, when the patient died late in the afternoon and the body had to be taken away. Friends had given permission to make the autopsy. It had to be made early or not at all, as nearly as I can explain that case.

The ACTING CHAIRMAN. Was there anything improper in that?

Doctor BLACKBURN. I think not.

Mr. HAY. Doctor, is there not a law which prescribes how many hours after a person dies the autopsy shall be held?

Doctor BLACKBURN. I have searched for such a law, but I have been unable to find it—that is, so far as my books on pathology, etc., are concerned. I have not consulted law books about it.

Mr. HAY. It is not a question of law books. It is a question whether it is not the law of the District of Columbia.

Doctor BLACKBURN. I do not know of such a law.

Mr. HAY. Is it not the law that you can not perform an autopsy until four hours after the person is said to have died?

Doctor BLACKBURN. I do not know of it.

Mr. HAY. You do not know of it?

Doctor BLACKBURN. There is something on the back of the death certificate, but I interpret that differently.

Mr. HAY. Have you one of those there with you?

Doctor BLACKBURN. I have not, sir. I think it refers to an act regulating cemeteries and the embalming of bodies, or something of that sort. I never thought that applied to the examination of bodies for scientific purposes.

The ACTING CHAIRMAN. Can you get us a copy of that—what is on the back of the death certificate?

Doctor BLACKBURN. Could I get it?

The ACTING CHAIRMAN. Could you get it?

Mr. HAY. A copy of it.

The ACTING CHAIRMAN. A copy of it, so that we might construe it. We might differ with you, you know, whether you are cutting a fellow up too soon or not.

Doctor BLACKBURN. The death certificates are not so very hard to find with us, but I haven't one with me.

The ACTING CHAIRMAN. You understand what we mean?

Doctor BLACKBURN. Yes, sir.

Mr. HAY. The law would be in the Revised Statutes, I suppose. Doctor, under what law do you perform an autopsy on a person who is not claimed by friends or who has no friends?

Doctor BLACKBURN. I am unable to tell you, sir. I was directed in my duties by the superintendents, and I have never known by what

authority it is done, further than the letter I submitted to the committee.

Mr. HAY. But is there not a law in the District by which you have to obtain the consent of the anatomical board before you can perform these autopsies on the persons of people who are unclaimed by their friends or who have no friends?

Doctor BLACKBURN. I never heard of any such restrictions on institutions.

Mr. HAY. Do you not think it your duty to find out about these laws which pertain to things which come directly under your jurisdiction?

Doctor BLACKBURN. It may be the duty of my superior officers.

Mr. HAY. If your superior officer would tell you to cut up some one within half an hour after he died, I suppose you would do it?

Doctor BLACKBURN. I think he would have to be responsible for it.

Mr. HAY. You think he would?

Doctor BLACKBURN. I do not feel that I would be able to disobey his orders.

Mr. HAY. If he were to tell you to cut up somebody before he died, you would do that, would you?

Doctor BLACKBURN. I think I could draw the line at that.

Mr. HAY. I am glad you can draw the line somewhere. Of course, I do not pretend to give the law, but it seems to me you are the responsible——

The ACTING CHAIRMAN. Is there such a law?

Mr. HAY. I am informed there is such a law.

Doctor EMMONS. There is an anatomical board that pertains to all unclaimed bodies at the hospitals.

The ACTING CHAIRMAN. An anatomical board has no more right to dead bodies than I have, unless it is the law.

Mr. CLARK. I have looked up the statute printed on the death certificate furnished by the coroner. It is explicitly stated that the law does require that they shall not be cut up in less than four hours.

The ACTING CHAIRMAN. That does not help us a bit. Where is the law?

Mr. CLARK. I say, let us get the statutes. I am giving you all the information I have.

The ACTING CHAIRMAN. Just suspend a moment, Doctor. We might as well settle this now as some other time.

Mr. HAY. I have here the Code of the District of Columbia; I will try to find it.

The ACTING CHAIRMAN. Have you taken any means to ascertain whether or not there is any law on the subject?

Doctor BLACKBURN. Nothing further than to consult this act I have spoken of, and I have made inquiry.

The ACTING CHAIRMAN. What act?

Doctor BLACKBURN. On the back of the death certificate. I do not remember the number of the act.

The ACTING CHAIRMAN. Is that an act or is it what some printer puts on there?

Doctor BLACKBURN. I think it is stated to be an act.

The ACTING CHAIRMAN. Of course if you have an act regulating death certificates, that is another matter.

Mr. HAY. There ought to be some law on it. There is a law in respect to that matter in every State in the Union.

The ACTING CHAIRMAN. About the death certificate?

Mr. HAY. No; about the turning over of unclaimed people who are dead. There is a law in Virginia, I know.

Doctor EMMONS. I can tell you what the opinion of the coroner is.

The ACTING CHAIRMAN. I do not care for the opinion of the coroner. I would just as soon have the opinion of a blacksmith. If there is a law, we ought to have it.

Doctor EMMONS. On the back of the death certificate is stated the exact statute on which this regulation is based, giving the statute and the date it was passed by Congress. I can get a death certificate for you in ten minutes. (See page 1796.)

Mr. HAY. There seems to be a consensus of opinion that there is something on the back of the death certificate. What it is or where it comes from I do not know.

The ACTING CHAIRMAN. You are a fine set of doctors here if you can not tell us what the law is, when you are certifying every day to the death of people. It ought to be elementary with you.

Mr. HAY. Doctor, do you remember the case of a man named George Brown?

Doctor BLACKBURN. Yes, sir.

Mr. HAY. When did he die? What time in the day?

Doctor BLACKBURN. What time in the day?

Mr. HAY. Yes.

Doctor BLACKBURN. I don't remember, sir.

Mr. HAY. Did you perform an autopsy on him?

Doctor BLACKBURN. Yes, sir.

Mr. HAY. How long after he died was it performed?

Doctor BLACKBURN. I don't remember that.

Mr. HAY. Sections 675, 676, and 677 of the Code are as follows:

SEC. 675. REMOVAL OF DEAD BODIES.—No dead body of any human being or any part of such body shall, in said District, be removed from place to place, interred, disinterred, or in any manner disposed of without a permit for such removal, interment, disinterment, or disposal granted by the health officer of said District, nor otherwise than in accordance with the terms of said permit; permits for the removal, interment, or disposal to be issued upon the presentation of a proper death certificate, signed by a physician registered at the health department of said District, who has attended the deceased during his or her last illness, or by the coroner of said District or his deputy, or by the proper municipal, county, or State authorities at the place where the death occurred; permits for disinterment (including permission to reinter or transport the body disinterred) to be issued upon the written application of the nearest relative or the legal representative of the deceased; and no superintendent or other person in charge of any cemetery in said District or other place for the disposal of dead bodies shall assist in or assent to or allow any such interment, disinterment, or disposition to be made in such cemetery or place until permit shall be given as aforesaid. It shall be the duty of every such superintendent or other person who shall receive any such permit aforesaid to indorse thereon the date of the interment, disinterment, or disposal, and to preserve, sign, and return the same to the health officer of said District before six o'clock postmeridian of the Saturday following the day of burial, disinterment, or disposal.

SEC. 676. CONVEYANCE THROUGH THE DISTRICT.—No dead body or part of the dead body of any human being shall be in any manner carried or conveyed from, in, to, or through said District by any person, or by means of any boat, vessel, car, stage, or other vehicle, or by any public or private conveyance, without a permit therefor first granted by the health officer of said District: *Provided*, That bodies or parts of dead bodies aforesaid, except such as have died of Asiatic cholera, yellow fever, typhus fever, smallpox (including varioloid), leprosy, the plague, diphtheria, or scarlet fever, may be brought into said District, or carried through the same in transit, upon a permit of the proper municipal, county, or State authorities of the place at which such person died; and whenever the remains of any deceased

person have been conveyed, transferred, or removed beyond the limits of said District it shall be the duty of the person or agent or officer of the corporation having charge of such conveyance, transfer, or removal to detach, date, sign, and return to the health officer the permit authorizing such conveyance, transfer, or removal before six o'clock postmeridian of the Saturday following the day of such conveyance, transfer, or removal of said remains.

SEC. 677. REPORTS OF DEATH.—It shall be the duty of any person or persons having custody or control of the dead body of any human being or any part of such body to report in writing or cause to be reported in writing, to the health officer of said District, within forty-eight hours after the death of the deceased, the name of said deceased and the location of the body or part thereof. No such body or part thereof shall be kept in such manner as to give rise to any offensive odors to the annoyance of any person or persons in the neighborhood or to the public, nor so as to be exposed to the public view; nor shall any such body or part thereof be permitted by the person or persons having custody or control of it to remain unburied for a longer period than one week after death without permission of the health officer, unless it has been cremated or deposited in the vault of some cemetery; nor shall any person publicly exhibit in said District, for pay or otherwise, any dead body of any human being or any part of such body without a permit from the health officer of said District so to do, except such exhibition be in connection with some Government museum or with some institution of learning permanently located in said District.

Mr. HAY. I do not see anything in there about any anatomical board.

The ACTING CHAIRMAN. Mr. Evans, you ought to be able to settle this question. Is there any law in the District of Columbia on the subject of holding autopsies? I do not mean some medical society law or some anatomical board law. I mean some positive statute law enacted by somebody who has authority to enact.

Mr. EVANS. I think the Code provides for that. I think section 683 applies.

Mr. HAY. That relates to permits to cremate and embalming. If the common law should obtain here in the case of there being no statute on the subject, there would be no right to do this at all, and the common law does obtain here unless there is a statute on the subject.

Mr. EVANS. I think section 683 of the Code is the only thing on that subject. That section is as follows:

SEC. 683. PERMIT TO CREMATE; EMBALMING.—It shall be unlawful for any person or persons to cremate or otherwise to destroy the dead body, or part of the dead body, of any human being in said District before the issue of the burial permit by the health officer of said District, and then only when said permit is countersigned by the coroner of said District, authorizing such cremation or destruction. It shall be unlawful for any person or persons to embalm, inject, or by any similar method preserve the dead body, or part of the dead body, of any human being in said District within four hours after death or before the issue of the death certificate; and in case the death is believed to be due to other than natural causes, or the cause thereof is unknown, such embalming, injecting, or preserving shall at no time be done unless such death certificate has been signed or approved by the coroner of said District.

The ACTING CHAIRMAN. That would not affect it. An autopsy is not a destruction of the body, in the sense of this statute. It has not come within the purview of it at all.

Mr. HAY. I think section 675 is nearer to it than any other section, although I do not know that that covers it.

Mr. EVANS. I think this particular section relates to the preservation of parts of the dead body.

Mr. HAY. When you dissect a body you do not exactly preserve it, do you?

Mr. EVANS. You preserve parts of it.

Mr. HAY. An autopsy is to determine what caused a man's death.

Mr. EVANS. Then nine-tenths of these autopsies over there would be useless, because they know beforehand what caused a man's

death. They die from heart disease, and things of that sort. The autopsy is for scientific purposes, relative to the advancement of knowledge on the subject of abnormal brain affections, and of course there has to be a preservation there. They preserve them, photograph them, and they lecture upon it.

Mr. BARCHFELD. All of which is very commendable.

Mr. EVANS. All of which, from a scientific standpoint, is commendable if it is within the law.

Mr. BARCHFELD. You said here a moment ago you had no law.

Mr. EVANS. I say that section that has been quoted——

The ACTING CHAIRMAN. That is not within gunshot of it.

Mr. BARCHFELD. There is no progressive community in the United States or anywhere else that objects to autopsies.

Mr. HAY. It is not the point, objecting to autopsies.

Mr. BARCHFELD. I understand; but you have no law to the contrary.

Mr. HAY. If there is no law, then you are under the common law. There certainly must be a law in this District about autopsies.

The ACTING CHAIRMAN. I doubt if there is any law here on the subject. I do not believe we have one in Ohio.

Mr. HAY. My impression is there is no law by which you can hold an autopsy on any body unless you get the permission of the friends, and if these people have no friends, then there is no law under which you can hold an autopsy on them, unless there is a statutory law here somewhere. You can not hold autopsies without any law; that is certain.

The ACTING CHAIRMAN. What would a man be guilty of if he did hold an autopsy?

Mr. HAY. He would be guilty of the common law offense of mutilating a dead body.

The ACTING CHAIRMAN. But there are no common law offenses in the District of Columbia, are there?

Mr. HAY. Of course there are, unless it is changed by statute.

The ACTING CHAIRMAN. We have an anatomical act in my State.

Mr. HAY. So have we.

The ACTING CHAIRMAN. Requiring all pauper dead from the 67 counties to be sent to the two counties that have medical institutions.

Mr. HAY. We have exactly that law in Virginia.

The ACTING CHAIRMAN. And they are for purposes of dissection.

Mr. HAY. That is exactly the law in our State. It has been the law twenty-five or thirty years.

Doctor WHITE. There is some such law here in the District, because I have had correspondence with the anatomical board.

Mr. HAY. There is an anatomical board, is there?

Doctor WHITE. Yes. When I first came here I had some correspondence with them. There was such a board then.

Mr. BARCHFELD. You never sent any bodies to them?

Doctor WHITE. No; because we used them for the same purposes as the medical colleges use them.

Dr. EMMONS. The morgue master is the agent of that board, and Doctor Schoenburg is one of the members. Each one of the medical colleges has a member, and they constitute the anatomical board.

The ACTING CHAIRMAN. Doctor, in making an autopsy, are there certain brain tissues that, unless the autopsy was made soon after death, would not aid you any?

Doctor BLACKBURN. Yes, sir.

The ACTING CHAIRMAN. Just tell us briefly about that.

Doctor BLACKBURN. The best method of studying the brain now is by means of a method known as Nissl's method, and it is acknowledged by all good workers that unless the tissue is obtained at the very earliest possible moment this stain is unreliable. When they are obtained early, it is one of the most valuable methods we have for studying the lesions of the nerve cells. That is one reason. I think the same would apply to almost all stains, that decomposition, which comes on very early, especially in some cases, would vitiate the conditions found, so that they would not be considered reliable.

The ACTING CHAIRMAN. And in such cases and for those reasons you hold an autopsy early after death?

Doctor BLACKBURN. Yes, sir; that is, from the scientific standpoint, for my special work, aside from those other cases I have mentioned, where necessity demanded it for other reasons.

Mr. BARCHFELD. Doctor, you spoke of making stains. Do you ever inject plaster into any of your brains?

Doctor BLACKBURN. Plaster?

Mr. BARCHFELD. Plaster.

Doctor BLACKBURN. No; not that I recall.

Mr. BARCHFELD. If you want to distend the vessels and show them out prominently, what is your method?

Doctor BLACKBURN. To distend the vessels and show them prominently, we use different injecting materials, a gelatine injecting material—gelatine and carmine or gelatine and Prussian blue. These methods are very difficult and are not applicable to brains as a rule.

Mr. BARCHFELD. You hold an autopsy in every instance?

Doctor BLACKBURN. No, sir; I think not over about one-half of the cases.

Mr. BARCHFELD. Why is that?

Doctor BLACKBURN. The other half are claimed by friends or sent away for some good reason which makes it inadmissible.

Mr. BARCHFELD. And those that you generally hold autopsies upon are generally buried at the institution, are they not?

Doctor BLACKBURN. Yes.

Mr. BARCHFELD. A good many of them?

Doctor BLACKBURN. I might say generally, although some go away afterwards.

Mr. BARCHFELD. You have never had people seriously object to the holding of an autopsy, have you?

Doctor BLACKBURN. No.

Mr. BARCHFELD. There is no reason why they should object.

Doctor BLACKBURN. We frequently have people request an autopsy.

Mr. BARCHFELD. Request it?

Doctor BLACKBURN. At least it comes to me so.

Mr. BARCHFELD. They are anxious to know, for the benefit of posterity and their family history, what is the lesion?

Doctor BLACKBURN. Yes, sir.

Mr. BARCHFELD. Every well-regulated hospital in the country has in connection with it a pathological institution?

Doctor BLACKBURN. Yes, sir.

Mr. BARCHFELD. And they all hold autopsies?

Doctor BLACKBURN. Yes, sir.

Mr. BARCHFELD. Certainly. Who do you make your reports to on the result of your autopsies; to the superintendent?

Doctor BLACKBURN. I make the report to the physician in charge, and the records are kept in the institution permanently.

Mr. BARCHFELD. You examine blood over there in cases of suspected malaria, do you?

Doctor BLACKBURN. Yes, sir; we do.

Mr. BARCHFELD. You examine all secretions?

Doctor BLACKBURN. All secretions.

Mr. BARCHFELD. Urine and fæces?

Doctor BLACKBURN. Urine, fæces, and sputum.

Mr. BARCHFELD. What have you to say as to the pathological laboratory under your supervision? Is it complete and perfect?

Doctor BLACKBURN. Yes; I think it is quite complete.

Mr. BARCHFELD. It is as good as any you know of in the country in connection with any hospital?

Doctor BLACKBURN. Yes; about as good.

Mr. BARCHFELD. Or better?

Doctor BLACKBURN. I am not very familiar with many of them, but I think our equipment is very good.

Mr. BARCHFELD. Anything you need in the line of research to institute work the superintendent cheerfully lets you have the necessary aid and assistance?

Doctor BLACKBURN. No; I think there is nothing that I actually need. Perhaps some very expensive instruments might be of a little use. High-priced lenses might be of a little use, but we can get along very well without them.

Mr. BARCHFELD. Do you examine all the cases of suspected typhoid fever or actual typhoid?

Dr. BLACKBURN. Yes, sir; the blood is always examined.

Mr. WALLACE. Doctor, what was the average age of those who died at the institution during the year ended by your last official report of the hospital?

Doctor BLACKBURN. I have made no calculation, sir, of the average age, but I should think their average well up in years.

Mr. WALLACE. Rather old people?

Doctor BLACKBURN. Rather old people; many old people.

Mr. WALLACE. Can you tell what was the average age of those on whom you held autopsies—for instance, the 114 autopsies out of 236 deaths occurring during the past year? Could you tell anything about the average?

Doctor BLACKBURN. I could make it very readily, but I have never made that calculation. I never had any occasion to make it. These things are kept on record, and at any time I can make the calculation if it is demanded or required. I never have made it.

Mr. WALLACE. You could not make any approximate average just now?

Doctor BLACKBURN. No, sir; I could not.

Mr. WALLACE. Would it not be possible to do away with the necessity of such a large ratio of autopsies to deaths by the method of frequent and thorough physical and mental examinations of the patients, and the recording of such diagnosis and clinical history by the attending staff?

Doctor BLACKBURN. I do not think I quite understand the first part of the question.

Mr. WALLACE. I will put it over again: Would it not be possible to do away with the necessity of such a large ratio of autopsies to the deaths there occurring by the method of frequent and thorough physical and mental examinations of the patients, and the recording of such diagnosis and clinical history by the attending staff?

Doctor BLACKBURN. I think it might be possible; but from my own standpoint, I think it would be a great loss to medicine. Every autopsy, I think, is valuable.

Mr. WALLACE. This means before the autopsy. You do not think it would be a better idea, then, to make that close physical examination and diagnosis and keep that clinical history by the whole staff?

Doctor BLACKBURN. Rather than an autopsy?

Mr. WALLACE. In advance of it?

Doctor BLACKBURN. Oh, by all means. That we get. We get a good clinical history now; but I do not think it would take the place of an autopsy.

Mr. WALLACE. That is what I want to get at. Would it not be sufficient to meet the demands of advancement and science to dissect the bodies of those cases presenting unusual symptoms and the rare forms of insanity and, in addition, one or two of the common types of insanity each year?

Doctor BLACKBURN. No; I do not think so. I think the more we can see the better.

Mr. WALLACE. The more dissections the better?

Doctor BLACKBURN. I think so. I never could have formed my own judgment as well without having some experience.

Mr. WALLACE. Is it not a fact that recent advancement of bacteriology and clinical diagnosis has materially decreased the necessity of pathological work?

Doctor BLACKBURN. I do not think so. I think it never will. I think they are closely related, but I do not think one can ever take the place of the other.

Mr. WALLACE. The advancement of the clinical diagnosis, then, helps you?

Doctor BLACKBURN. Yes, sir.

Mr. WALLACE. As a pathologist?

Doctor BLACKBURN. Yes, sir.

Mr. WALLACE. You have a refrigerator for cooling and preserving bodies at the hospital, have you?

Doctor BLACKBURN. Yes.

Mr. WALLACE. Did you, during the month of January or February of this year, before the medical society of the District of Columbia, read a paper on brain tumors, and, while demonstrating a brain removed from a woman, state: "This tumor was removed from the body within three hours after death, body still warm," or words to that effect?

Doctor BLACKBURN. Very likely, sir. I think I did.

Mr. WALLACE. You say you do not know anything about this four-hour law?

Doctor BLACKBURN. No.

Mr. WALLACE. Or whether there is such a law?

Doctor BLACKBURN. I do not.

Mr. HAY. Doctor, you say you are aided in your operations or in your department by an interne. Anybody else?

Doctor BLACKBURN. At present I have an assistant who is in training for doing pathological histology.

Mr. HAY. Anyone else?

Doctor BLACKBURN. I have also an assistant there who takes the notes of the autopsy.

Mr. HAY. Who is that?

Doctor BLACKBURN. Doctor Hagner.

Mr. BARCHFELD. Doctor, in the interests of science and for the well-being of the human family, is it not right and proper that an autopsy should be held in every instance?

Doctor BLACKBURN. I think so. I see nothing improper in it.

Mr. BARCHFELD. When a body is dead, it is dead. It does not make any difference whether that autopsy occurs five minutes after death or five weeks after.

Doctor BLACKBURN. Yes, sir.

Mr. BARCHFELD. You know when that body is dead?

Doctor BLACKBURN. I do.

Mr. BARCHFELD. There is not a State in the Union that objects to autopsies, so far as you know?

Doctor BLACKBURN. Not that I know of.

Mr. BARCHFELD. Nor do I.

Mr. WALLACE. Doctor, do you not know of a good many cases where persons have been pronounced dead and afterwards revived and lived?

Doctor BLACKBURN. I do not know of any such case. I hear of them, but I don't know them.

Mr. WALLACE. Do not the books give such cases? Do you not find such cases reported?

Doctor BLACKBURN. Possibly occasionally a case is reported, but I think they must be very rare, and I can not imagine how a man with any experience can make a mistake of that kind.

Mr. BARCHFELD. How many autopsies have you held in your time, Doctor?

Doctor BLACKBURN. 2,095.

Mr. HAY. You have nothing to do with the treatment of the patients?

Doctor BLACKBURN. No, sir.

(At this point the chairman took the chair.)

Mr. SMYSER. You have nothing to do with the patient until he is dead. Is that it?

Doctor BLACKBURN. Yes, sir.

Mr. SMYSER. Do you sometimes find bruises on them?

Doctor BLACKBURN. Occasionally.

Mr. SMYSER. What do you do in such a case?

Doctor BLACKBURN. In such a case I inform the physician who has attended the patient, or the superintendent, and the cases are always investigated.

Mr. SMYSER. You mean with a view to ascertaining what occasioned the bruise you find?

Doctor BLACKBURN. Yes, sir.

Mr. SMYSER. Do you always report it?

Doctor BLACKBURN. To the best of my knowledge, I always do.

Mr. SMYSER. A question is handed to me. I do not know myself just what it means. I will read it. Did Doctor Cannon, a patient, aid you in the work at the rest? I do not know what that means.

Doctor BLACKBURN. The rest is the name given to the laboratory by Doctor Godding.

Mr. HAY. Where you perform these autopsies?

Doctor BLACKBURN. Yes, sir.

Mr. SMYSER. Then I do not care who aided you, so I was not called in to help.

The CHAIRMAN. I think that is all, Doctor.

TESTIMONY OF A. E. OFFUTT.

A. E. OFFUTT, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Mr. Offutt, where do you reside?

Mr. OFFUTT. At the Government Hospital.

The CHAIRMAN. How long have you been there?

Mr. OFFUTT. I entered the service of the hospital in 1880 under Doctor Godding and served for a year and a half as an attendant and for about five years and a half as a clerk in the general office. I resigned there in 1888 and accepted a position in the New York hospital known as Bloomingdale, a position somewhat similar to the one I am holding at present.

The CHAIRMAN. What is the position you hold now in St. Elizabeth's?

Mr. OFFUTT. It is known as purchasing agent.

The CHAIRMAN. How long have you held that position?

Mr. OFFUTT. About six years.

The CHAIRMAN. You were appointed by Doctor Richardson?

Mr. OFFUTT. I was appointed by Doctor Richardson; yes, sir.

The CHAIRMAN. You have held the position continuously for six years?

Mr. OFFUTT. Yes, sir.

The CHAIRMAN. What are your duties?

Mr. OFFUTT. I am afraid I will have to give you a sort of roundabout answer in reply to that question. It will not take long to do it.

The CHAIRMAN. Well, we want to know.

Mr. OFFUTT. Toward the close of each fiscal year the heads of the various departments at the institution—such as the electrician, the engineer, the dry-goods storekeeper, the grocery storekeeper, the pharmacist, and the farm steward—send to my office a list of the probable requirements for the ensuing fiscal year. Those I have arranged alphabetically under the different heads, and they are submitted to the Secretary of the Interior for approval. They are usually approved. In the meantime advertisements are inserted in some of the leading papers of the country, inviting bids on these different items; but in the meantime, between the compilation of these lists and the time they are advertised for, a board is appointed by the Secretary.

The CHAIRMAN. The Secretary of the Interior?

Mr. OFFUTT. The Secretary of the Interior. It is a board to open bids, examine samples, and recommend awards. This board at present consists of the superintendent of the hospital, as chairman; Mr. William B. Acker, the chief of the miscellaneous division of the Interior Department; Judge Parker—I don't know the initials—of

the General Land Office; Mr. Rapp of the Secretary's office; and I am fifth member of the committee.

The CHAIRMAN. So that all the members of that board, with the exception of Doctor White and yourself, are in the Interior Department?

Mr. OFFUTT. In the Interior Department; yes, sir.

The CHAIRMAN. All right.

Mr. OFFUTT. This board meets at stated intervals. They examine the samples and make certain recommendations to the Secretary. We get up a list and submit it to him. A copy of that list is sent to the hospital, and from that list we make up monthly orders. But there is another class of supplies that are purchased in what is known as the open market. We have the permission of the Secretary to make these purchases. They consist principally of perishable articles, eggs, for instance, and vegetables, fresh fish, fruits, and oleomargarine. Those are the principal things purchased in open market. We purchase clothing also—men's suits. That is a very large item, by the way.

The CHAIRMAN. You purchase the men's suits in the open market?

Mr. OFFUTT. Yes, sir; we purchase those in the open market. It would be impossible, I think, to advertise for those.

Mr. HAY. You say it would be impossible to advertise, Mr. Offutt. Why?

Mr. OFFUTT. There are so many different sizes and different people we have to provide with clothes. I buy for the indigent insane, not for the pay patients.

Mr. HAY. I understand.

Mr. OFFUTT. Their clothing.

Mr. HAY. How many indigent insane are there?

Mr. OFFUTT. I really don't know, Mr. Hay. We buy about five or six hundred suits a year.

The CHAIRMAN. Can you name exactly what you advertise for specifically?

Mr. OFFUTT. I have a list, if you will allow me to refer to it.

The CHAIRMAN. I would like it very much indeed. We want that.

Mr. OFFUTT. It is a rather lengthy list. There are some 400 items on it. Do you care to have me read it? I will call it off, if you like.

The CHAIRMAN. Let me look at that first. We do not want to encumber the record any more than is necessary.

Mr. OFFUTT. All the staple articles, such as groceries, are retained in that list.

The CHAIRMAN. Those are the articles for which you advertise, are they?

Mr. OFFUTT. Yes, sir.

The CHAIRMAN. Before we take this up specifically, Mr. Offutt, what are your duties in regard to the schedule of items which you send to the Secretary of the Interior? Do you prepare it in the first instance?

Mr. OFFUTT. Yes, sir; I prepare it in the first instance from memoranda submitted to me by the heads of these various departments of the institution.

The CHAIRMAN. How many heads of the departments are there that submit requisitions to you?

Mr. OFFUTT. We have the electrician, the engineer, the dry-goods storekeeper, the grocery storekeeper, the pharmacist, and the farm steward. They embrace about all, I think.

The CHAIRMAN. Who makes up the list in regard to this division 1 that there is here—meats, provisions, groceries, feed, crockery, etc.?

Mr. OFFUTT. I usually get that from the grocery storekeeper.

The CHAIRMAN. That is one of the regular departments of the institution, is it?

Mr. OFFUTT. Oh, yes, sir.

The CHAIRMAN. And the heads of these several departments make a requisition upon you?

Mr. OFFUTT. For the supplies; yes, sir. That list there, I might say, is mostly monthly orders.

The CHAIRMAN. Yes; I well understand. I will get at that in a little while. Do you then prepare the advertisements for bids?

Mr. OFFUTT. No, sir; they are prepared in the office of the Secretary of the Interior.

The CHAIRMAN. You make the reports of the needs of the several departments that are given to you by the heads of such departments?

Mr. OFFUTT. To the Secretary.

The CHAIRMAN. And you send that to the Secretary of the Interior?

Mr. OFFUTT. Yes, sir.
The CHAIRMAN. The advertisements are then inserted by the Interior Department in such newspapers as are selected by the Secretary of the Interior?

Mr. OFFUTT. Yes, sir. I do not happen to know the papers.

The CHAIRMAN. But I mean to say that is entirely outside of your jurisdiction?

Mr. OFFUTT. Yes, sir.

The CHAIRMAN. That is entirely in the control of the Secretary of the Interior?

Mr. OFFUTT. Yes, sir; he has entire control.

The CHAIRMAN. And the contracts for the supply of these goods are made by whom?

Mr. OFFUTT. Made by the Secretary.

The CHAIRMAN. So that all your duties in connection with this matter are to gather together from the heads of the departments the several lists of articles that they will need, make your report to the Secretary of the Interior, the Secretary of the Interior making the contracts with the several people who supply the material, and all you have to do thereafter in connection with these advertised-for goods is to make your monthly requisitions for what the hospital will need? Is that a correct statement?

Mr. OFFUTT. Yes, sir; that is a very good statement—outside of the orders I enumerate that are purchased in the open market.

The CHAIRMAN. I understand. I have made a fairly correct statement, have I not, of the articles that are advertised for by the Secretary of the Interior?

Mr. OFFUTT. Yes, sir; that is correct.

The CHAIRMAN. They are entirely outside of your jurisdiction, except to notify the Secretary of the Interior what you think you are going to require for the use of the hospital?

Mr. OFFUTT. Yes, sir; that is correct.

Mr. SMYER. Under that arrangement how do you get a rake-off?

Mr. OFFUTT. You are getting personal.

Mr. SMYER. We might as well dispose of it, for I will tell you that has been suggested to me. I want to know about it.

Mr. OFFUTT. I am rather surprised to hear it. I didn't know there was such a thing as a rake-off.

Mr. SMYSER. Is there such a thing?

Mr. OFFUTT. No, sir; not in my business.

Mr. SMYSER. Your duty ends when you submit your list to the Secretary of the Interior?

Mr. OFFUTT. Yes, sir.

Mr. SMYSER. Do they not send you a firkin of butter occasionally?

Mr. OFFUTT. No, sir; such a thing is unknown. I live at the hospital.

The CHAIRMAN. Mr. Offutt, in regard to the things that you purchase in the open market; do you purchase the meats for the institution in the open market?

Mr. OFFUTT. No, sir; that is on our contract list. You will find it there.

The CHAIRMAN. That is contracted for?

Mr. OFFUTT. Yes, sir.

Mr. HAY. Can you give those articles?

Mr. OFFUTT. That I purchase?

The CHAIRMAN. Yes. Can you enumerate what you purchase in the open market?

Mr. OFFUTT. I probably could not give you every detail; but all the vegetables, fruits, eggs, fresh fish, and oleomargarine.

The CHAIRMAN. Do you advertise for those?

Mr. OFFUTT. No, sir; we do not advertise for those.

The CHAIRMAN. Where do you purchase them, usually?

Mr. OFFUTT. Do you want me to name all of those things, or any specific article? For instance, the oleomargarine we buy from the Capital City Dairy Company, Columbus, Ohio, at present.

Mr. SMYSER. That is a good article, I guess.

Mr. OFFUTT. It is the best we can find.

Mr. BARCHFELD. That is the establishment of H. C. Pirrung?

Mr. OFFUTT. Yes, sir; H. C. Pirrung is the president of it.

Mr. BARCHFELD. It is a good institution. I have visited it and seen them make the oleomargarine.

The CHAIRMAN. I have in my hand the report of the Government Hospital for the Insane for 1905. Can you from that indicate just where it shows what articles are purchased in the open market? (Report printed as a public document.)

Mr. OFFUTT. Mostly in the articles I have marked here, and some in the list under drugs and medicines. Our drug list is not at all complete, for the reason that there is a remedy that may be used today, and to-morrow you might perhaps discard it, and if you accumulate a lot of that stuff you would have no use for it.

The CHAIRMAN. You purchased in the open market the butterine, the milk, cheese, and eggs?

Mr. OFFUTT. I marked that for the eggs and butterine, but not the milk.

The CHAIRMAN. You purchased the butterine and eggs?

Mr. OFFUTT. Yes.

The CHAIRMAN. You purchased in the open market salt and smoked meats?

Mr. OFFUTT. I put them there for the salt meats, but not all of those.

The CHAIRMAN. But some of the salt meats?

Mr. OFFUTT. Yes.

The CHAIRMAN. And fresh fish?

Mr. OFFUTT. I purchased all that in the open market.

The CHAIRMAN. And all fresh fruits and vegetables?

Mr. OFFUTT. Yes.

The CHAIRMAN. Under the head "dry goods," what do you purchase there?

Mr. OFFUTT. I think there they say "clothing" ——

Mr. HAY. Of what does the clothing consist?

Mr. OFFUTT. It is men's suits.

Mr. HAY. And underwear, too?

Mr. OFFUTT. No, sir; the underwear is made in the hospital.

Mr. HAY. It is made at the institution?

Mr. OFFUTT. Yes.

The CHAIRMAN. Is all of the underwear that is supplied to the patients made in the institution?

Mr. OFFUTT. Possibly with the exception of some of the pay patients. That I do not know; but that does not come under my supervision, except in a general way.

The CHAIRMAN. I mean the indigent patients.

Mr. OFFUTT. Yes, sir.

The CHAIRMAN. All of the underwear is made in the institution?

Mr. OFFUTT. Yes, sir; made in the institution.

Mr. WALLACE. What was the amount of your annual purchase in the open market?

Mr. OFFUTT. I have not figured that as closely as I might have, but it would be approximately, I should say, sixty thousand dollars, more or less. I could give you that exactly, but I have not got it now—there is so much memoranda about that.

Mr. HAY. Why did you not advertise? You say you did not advertise for clothing. Is it not a fact that the Army advertises for clothing?

Mr. OFFUTT. They advertise for army clothing, I think; yes, sir. I do not purchase army clothing.

Mr. HAY. Do not various other institutions in the District of Columbia advertise for clothing?

Mr. OFFUTT. I am not familiar with their methods, Mr. Hay. I do not know.

The CHAIRMAN. Why is there a different method of procedure in regard to the clothing and some of these other things that the Interior Department advertises for?

Mr. OFFUTT. I hardly know just what answer to make to that. It has been the custom for years, long before my advent in the hospital, to purchase those things in open market. It would be difficult, I imagine, to make an estimate of how much they would want, and as to the size. The size varies considerably. Some of them are very small, and then we have some very large people there, so that I do not think it would be a good thing to attempt that.

I ask for quotations from the leading merchants in the District on the suits I purchase. I go around and look at them and take what is in my opinion the best at the price. I want to say in this connection that we are clothing those inmates now at least 50 per cent better than we were during my first experience at the hospital. I give that as a fact. I can prove it.

The CHAIRMAN. Is most of this clothing bought in the market here in Washington?

Mr. OFFUTT. Yes, generally, it is bought in Washington; yes, sir. Perhaps I have a predilection for local dealers.

Mr. HAY. From whom did you buy clothing for the fiscal year just ended?

Mr. OFFUTT. I think there were three firms, Parker, Bridget & Co., Saks & Co., and the Bieber, Kauffman Company—between those three people I usually make my purchases, they being the leading large dealers in Washington, or among the largest dealers.

Mr. HAY. They are not wholesale people, are they.

Mr. OFFUTT. Yes, sir; they are wholesale. They are not manufacturers, but they are dealers—manufacturers' agents.

The CHAIRMAN. The next item of importance that you speak of there is butterine—that is, oleomargarine?

Mr. OFFUTT. Yes, sir.

The CHAIRMAN. That, you say, you purchased from whom?

Mr. OFFUTT. From the Capital City Dairy Company, at present. They have been furnishing it for the last eight or nine months, I believe. Occasionally I break away from those people and perhaps I get butter from some one else, but I have always gone back to them. They certainly furnish very superior butterine, the best butterine I have been able to obtain at their terms, and I have placed orders with others. There is not a manufacturer in the country that I have not placed an order with for oleomargarine. That is my own suggestion that it is used in the institution, I admit.

The CHAIRMAN. How do you place the orders with them? Do you make an agreement with them at the beginning of the fiscal year as to the prices they are going to charge?

Mr. OFFUTT. No, sir; I do not think so. We probably would not be able to get the lowest prices if we did that.

Mr. BARCHFELD. What are you paying for it now?

Mr. OFFUTT. 12½ cents a pound.

The CHAIRMAN. They publish periodically a list of prices, I suppose?

Mr. OFFUTT. Yes; I get them. I get quotations from other people. I do not have to solicit them; they give them to me without solicitation.

Mr. BARCHFELD. By using oleomargarine in place of butter, how much do you think you save the institution annually?

Mr. OFFUTT. The average yearly price of butter last year, as given by the board of trade, was 24 cents, and the price of the oleo is 12½ cents. The butter is just double the price of the oleomargarine and we are probably saving the institution about \$12,000 a year, if that were the only object in using the oleo.

The CHAIRMAN. How about eggs? Do you buy those in the open market?

Mr. OFFUTT. Yes, sir; in the open market.

The CHAIRMAN. The price of eggs fluctuates according to the season of the year?

Mr. OFFUTT. Yes; we are paying 17½ cents now for eggs.

The CHAIRMAN. Where do you get your eggs?

Mr. OFFUTT. In Washington. They are what they call "nearby" eggs—nearby meaning, I suppose, the States of Maryland and Virginia and the District of Columbia. The District of Columbia, I imagine furnishes a few.

The CHAIRMAN. Do you deal, in buying eggs, with the produce dealers here in Washington? You do not hunt around the country, do you?

Mr. OFFUTT. No; it would not be well to do that. I could do that, but probably I would get an egg that would not be of the same commercial value as the nearby eggs. Tennessee sends an enormous quantity of eggs to this market. They are small eggs, but they are just as good I imagine. But an egg that travels three or four hundred miles will not be as good as a nearby egg. For that reason I purchase the nearby eggs. We use about 800 dozen a week, now.

Mr. HAY. You buy from the same dealer?

Mr. OFFUTT. Not all the time. I have gone around to various dealers; but I purchase largely from James F. Oyster, one of the local dealers here, who handles, I imagine, more eggs than any other dealer and who candles his eggs every day, winter and summer. I do not believe that most of the dealers do that. I am under that impression, anyhow. I have been in his place at all times and I have seen him candling eggs.

Mr. BARCHFELD. What is the character of the eggs furnished you?

Mr. OFFUTT. They are always good, as far as I know. I believe some one has testified at one time that there have been two or three eggs that have been chloroformed, or something of that sort.

Mr. HAY. How many eggs do you say you use a week?

Mr. OFFUTT. Eight hundred dozen eggs a week, about that. Just at present we are getting a quantity of eggs from our farm, but I do not know just how many—probably 150 dozen, or something like that.

The CHAIRMAN. Do you furnish the eggs that you get from the farm, too?

Mr. OFFUTT. No, sir; I do not.

The CHAIRMAN. You do not have anything to do with that?

Mr. OFFUTT. No, sir; I do not have anything to do with that.

The CHAIRMAN. It merely lessens the number of eggs you have to buy on the open market?

Mr. OFFUTT. Yes; but not materially—for a few months in the year, probably in April and May.

The CHAIRMAN. You purchase fruits and vegetables in the market here?

Mr. OFFUTT. Yes.

The CHAIRMAN. Do you purchase canned vegetables as well as the others?

Mr. OFFUTT. They are under contract.

The CHAIRMAN. They are all under contract?

Mr. OFFUTT. Yes, sir.

The CHAIRMAN. It is only the fresh fruits and vegetables that you buy in open market?

Mr. OFFUTT. Yes, sir.

Mr. HAY. When did the board that you speak of hold its last session?

Mr. OFFUTT. The board of awards?

Mr. HAY. Yes.

Mr. OFFUTT. They are supposed to be in session now. We have been without the service of one or two of the members—the superintendent has not been able to be there—but we are on that work now. I would be there to-day if I were not here.

Mr. HAY. They meet every year, do they?

Mr. OFFUTT. Yes, sir; it is an annual affair.

The CHAIRMAN. Do they determine the firms from which you shall purchase your supplies?

Mr. OFFUTT. Yes, sir. I am one of the board.

The CHAIRMAN. I understand that. And you report the result of your previous dealings with firms here, as to whether the dealings have been satisfactory or not?

Mr. OFFUTT. Yes; if that question should arise, as to the character of the dealer, I am in a position to furnish the board with such evidence.

Mr. HAY. You purchase all the fresh fish here, I suppose, too?

Mr. OFFUTT. Yes, sir; that is an open-market purchase. I think it would be impractical to put that on a contract list; I think we would have trouble. It is rather a difficult matter as it is, to supply——

Mr. HAY. How much fresh fish do you buy a year?

Mr. OFFUTT. I buy about 1,500 pounds a week, I suppose.

Mr. BARCHFELD. Where do you get those?

Mr. OFFUTT. They are purchased in Washington from a firm by the name of Javins & Sons. Most all of the local institutions purchase, I think, at the same place. They are large dealers in Washington.

Mr. BARCHFELD. Do you ever go down to the wharf when the fish boats come in?

Mr. OFFUTT. No, sir; I do not go down to the wharf. Most of the fish we purchase are cold-storage fish. We can not go in the open market and purchase 1,500 pounds of fresh fish. I might do it by going to five or six dealers. I have a verbal agreement with these people as to what they shall purchase and the price.

Mr. HAY. Salt meats, how much do you usually buy in the open market?

Mr. OFFUTT. Not a great deal. That refers mostly to Potomac herrings—salt herrings in season.

Mr. HAY. Chickens and turkeys and things of that kind you usually buy in the open market?

Mr. OFFUTT. Yes, sir; we buy turkeys at Christmas time only.

Mr. HAY. How many of those do you buy?

Mr. OFFUTT. About 3,000 pounds, as I recall now.

Mr. HAY. A week?

Mr. OFFUTT. No; just for the one week preceding Christmas. We do not buy them at other times. We buy fowls.

Mr. HAY. I mean chickens and the whole thing.

Mr. OFFUTT. Oh, I thought you referred to turkeys. We buy about 215 pounds a week of chickens.

Mr. HAY. From whom do you buy those?

Mr. OFFUTT. From a firm by the name of Golden & Co.

Mr. HAY. Can you tell us approximately how much it costs to buy the various supplies for the institution, both in the open market and under these advertised bids a year?

Mr. OFFUTT. You have a recapitulation of it right there in that report. I could not tell very well.

The CHAIRMAN. Have we it here?

Mr. WALLACE. We stated about \$60,000 in the open market.

Mr. OFFUTT. Yes; in the open market.

Mr. HAY. Outside of salaries, I mean.

Mr. OFFUTT. Outside of salaries, you have it just right.

Mr. HAY. That includes, I suppose, the repairs and supplies for repairs, paints, oils, and everything of that sort?

Mr. OFFUTT. Yes.

Mr. HAY. Everything used in the institution?

Mr. OFFUTT. Yes, sir.

The CHAIRMAN. I do not see just how that summary is made there, Mr. Offutt.

Mr. OFFUTT. Under the heading "subsistence" we have flour, meal, crackers; laundry supplies, coal, dry goods, medical supply, farm and garden, and repairs and improvements.

The CHAIRMAN. What we want to get at is an approximate total of the amount of the supplies that are purchased by advertisements and the supplies that are purchased in open market.

Mr. OFFUTT. I think I can get at that very nearly, eliminating salaries and wages, about \$83,627.

Mr. HAY. It must be more than that.

Mr. OFFUTT. Oh, yes, it is more than that—I don't know just how to get around that. The ward service and salaries and wages combined are \$134,000 and we seem to have spent \$296,000. Of that I should say about \$60,000 in open market. That may not be an absolutely correct statement.

The CHAIRMAN. So that there is something over \$230,000 that is expended after advertisement in the Interior Department, and about \$60,000 you spend in the open market?

Mr. OFFUTT. Yes, sir; about that.

Mr. HAY. Drugs you say you buy in the open market?

Mr. OFFUTT. Largely, yes.

Mr. HAY. Drugs?

Mr. OFFUTT. Yes, sir; we have a drug contract list there, but it is not as complete as we would like it. You can see that a drug list would be almost never ending.

Mr. HAY. Do you buy all drugs in the open market?

Mr. OFFUTT. No, sir; not all. Sometimes there are special remedies and medicines that are wanted for immediate use, and they are purchased in the open market.

The CHAIRMAN. In regard to those drugs, I suppose the medical staff make requisitions upon you, and if you have not those drugs in stock you go out and buy them?

Mr. OFFUTT. Yes, sir.

The CHAIRMAN. Otherwise, standard articles that are used in all institutions are advertised for by the Interior Department, are they not?

Mr. OFFUTT. Yes, sir.

The CHAIRMAN. The only things that you buy in the open market are—

Mr. OFFUTT. Emergency orders or requisitions in the drug line.

The CHAIRMAN. The medical staff notifies you as to what they want?

Mr. OFFUTT. Yes, I get an order.

The CHAIRMAN. And those you buy?

Mr. OFFUTT. Yes, sir.

The CHAIRMAN. Where do you buy them? Here in Washington?

Mr. OFFUTT. Yes, sir; I divide it up between the two wholesale houses in town, Tschiffel and Gilman, mostly.

The CHAIRMAN. Do you think it would be practicable to advertise for any more articles than you do advertise for now?

Mr. OFFUTT. It is possible. We are constantly adding to the list. Last year I think we probably added 45 or 50 items to the contract list of things that we found we had been using in the fiscal year before. The list is larger now, I think, than it has ever been.

The CHAIRMAN. The list of articles of all kinds that you advertise for is determined upon by this board, consisting of Doctor White and yourself and the three employees in the Interior Department. Is that true?

Mr. OFFUTT. Yes, sir.

Mr. SMYSER. Do you live at the institution?

Mr. OFFUTT. Yes, sir; I live there.

Mr. SMYSER. Why?

Mr. OFFUTT. Why?

Mr. SMYSER. That was my question.

Mr. OFFUTT. It is more convenient for me.

Mr. SMYSER. Are you married?

Mr. OFFUTT. Yes, sir; I am married.

Mr. SMYSER. You have separate rooms and all that?

Mr. OFFUTT. Yes, sir; I have separate rooms.

Mr. SMYSER. And you keep house?

Mr. OFFUTT. Yes; we keep house.

Mr. SMYSER. And you eat at the common dining table there?

Mr. OFFUTT. I eat with about 34 other people. There are two dining rooms in the Administration building.

Mr. SMYSER. Is there any other reason? Are you required to live there?

Mr. OFFUTT. No, sir; I rather asked the superintendent to permit me to live on the outside, but he gave me a reason that I had not thought of before that.

Mr. SMYSER. What was the reason?

Mr. OFFUTT. He said that I would be criticised for every bundle or package that I brought to my home. I did not realize it until he mentioned it to me.

Mr. SMYSER. What is that?

Mr. OFFUTT. That any package that I might take to my home some one might say something was being given to me, and I would prefer to be relieved of all that.

Mr. SMYSER. A necktie, or a suit of clothes, or something else?

Mr. OFFUTT. Yes, sir.

Mr. SMYSER. Is that one of the reasons, at the suggestion of Doctor White, why you remain there and make your home in the institution?

Mr. OFFUTT. Yes, sir. Otherwise I would very much prefer to live outside.

Mr. SMYSER. Do you pay board, or is that a part of your compensation?

Mr. OFFUTT. That is part of my compensation.

Mr. SMYSER. Let us take up the meat. For instance, you advertise for beef, meat. Who furnishes you your fresh meats now?

Mr. OFFUTT. Armour & Co. this year.

Mr. SMYSER. Was that an open bid?

Mr. OFFUTT. No, sir; they advertised for the beef.

Mr. SMYSER. I mean a competitive bid?

Mr. OFFUTT. Yes, a competitive bid; yes, sir.

Mr. SMYSER. And you fell into the hands of——

Mr. OFFUTT. The Philistines.

Mr. SMYSER. The Chicago packers?

Mr. OFFUTT. Yes, sir. I do not know that I ought to make this statement, because I can not back it up, but each year one or the other of the large firms get the contracts. First it will be Armour, or Swift or Nelson Morris. With the possible exception of the contract for the next fiscal year, it always goes to Armour. They had it last year. As far as I know, it is the first time in the history of the hospital that it has been held consecutively by one firm, but I may be wrong about that.

The CHAIRMAN. Is it a part of your duty to inspect the meat that comes to the hospital?

Mr. OFFUTT. No, sir; my duty ends with the purchase of the goods and the delivery of them.

The CHAIRMAN. Whose duty is it to inspect the meats that come in?

Mr. OFFUTT. We have a storekeeper and a house steward to do that, and if they find things wrong it is reported to me.

Mr. SMYSER. Then what do you do?

Mr. OFFUTT. If I should not happen to be there the storekeeper has instructions to return it without any further question. If the meat is not satisfactory, or whatever it may be, if I am there I usually go and look at it, and if it is not up to the contract I usually return it, but I am guided largely in that by the house steward, who is a very careful man, and who on one or two occasions has returned things which, had I been in his place, I would have kept. I remember, concerning the turkeys last Christmas, I ordered 3,000 pounds, and it came on a very warm night and they sweated in the barrels, and when they got there they did not look quite as fresh as they might. We sent them back. I saw them, but I did not oppose sending them back. On another occasion when I was downtown one of the dealers told me that he had received back a lot of rice that he had sent that morning. I looked at it and I could not see any reason for returning it. He is an unusually careful man and he has instructions to return what he thinks is not right. If I am not there, he assumes the responsibility. If I am there, I take it.

Mr. SMYSER. Is it a rule that you rather err against the fellow who furnishes the stuff than against the patients?

Mr. OFFUTT. Yes, sir.

Mr. SMYSER. And if it is not quite up to the standard, as you think, you send it back?

Mr. OFFUTT. Oh, yes; we send it back.

Mr. SMYSER. You do not take any chances with it. Is that it?

Mr. OFFUTT. We do not want to take chances; no, sir.

Mr. SMYSER. All of these competitive bids come there and you submit them. Then they are taken charge of by the Secretary of the Interior?

Mr. OFFUTT. Yes, sir.

Mr. SMYSER. And the contracts are awarded by him?

Mr. OFFUTT. Yes, sir. The bonds for them are made out at the Department. These people are all under bonds to furnish supplies according to the specifications. There are certain specifications

named in the proposal governing the character of the goods. I do not think it is there [indicating].

Mr. SMYSER. Have you a copy of your specifications?

Mr. OFFUTT. Yes; I have that. Do you care to have me read from it as to the beef, or anything you ask?

Mr. SMYSER. Yes; take the beef, and read that.

Mr. OFFUTT. The heading of the item is "Quantity and quality of articles. The fresh beef must be all native bullock beef, best in quality and condition, fit for immediate use, and from fore and hind quarter beef proportionately. Sides to weigh not less than 325 nor more than 375 pounds.

"Necks must be cut off at fourth vertebral joint, and the breasts trimmed down. Shanks of fore quarters must be cut off at 4 inches above the knee-joint, and of hind quarters 8 inches above the hock joint. Necks, shanks, and kidney tallow to be excluded from delivery, as well as meat from bulls, stags, and diseased cattle." That is all it says in reference to fresh meats, but there are other specifications governing all the meats. At certain times of the year the beef does not weigh quite as much as it does at other times. It is light in the early spring, but if we get good quality we do not haggle over a few pounds in weight, so that it is only in a general way that we put that in.

Mr. SMYSER. Do you come in contact with these bidders at all?

Mr. OFFUTT. I see them all in a general way; yes. My business is going through the markets practically every day, four days a week, I will say. I see them, and that is all.

Mr. SMYSER. I mean the competitive bidders under the contract.

Mr. OFFUTT. No, sir; I never see them at all.

Mr. SMYSER. They go to the Secretary of the Interior?

Mr. OFFUTT. Yes, sir.

Mr. SMYSER. And you do not see those bidders, do you?

Mr. OFFUTT. No, sir; I do not see them at all. I do not know them at all.

Mr. SMYSER. Do you have any means of knowing who is the highest or the lowest bidder on any given article?

Mr. OFFUTT. Oh, yes; these are bonded——

Mr. SMYSER. I mean before they are bonded.

Mr. OFFUTT. No; not at all.

Mr. SMYSER. You do not get to see them?

Mr. OFFUTT. No, sir; I do not get to see them, and they do not get to see me.

Mr. SMYSER. I suspect that they all know you are the purchasing agent out there.

Mr. OFFUTT. I expect they know that. These local dealers certainly know it, or their agents.

Mr. SMYSER. I want to be explicit about this, Mr. Offutt, because it has been suggested to me that there is something wrong in the purchase of supplies out there.

Mr. OFFUTT. Yes, sir.

Mr. SMYSER. Is there anything wrong that you know of?

Mr. OFFUTT. Nothing that I know of; no, sir.

Mr. SMYSER. If there was something, you might have a delicacy about telling us?

Mr. OFFUTT. I would feel that I should tell it. I have sworn to tell all I know about it here.

Mr. SMYSER. So far as the purchase of supplies there in a general way is concerned, it is conducted like all other governmental institutions, such as the Army, the Navy, and things of that kind?

Mr. OFFUTT. Yes, sir; I think so. I held a similar position in a New York hospital for seven years. There I had carte blanche to go wherever I pleased to make purchases; but the institution was unlike our present institution. We had patients who paid more money, and I suppose I got a little bit better things there, and more variety; but it was about the same general character of institution.

Mr. SMYSER. Is it your judgment that under the system by which you operate out here, both as to price and quality, you get as good as you could under any other system of purchase?

Mr. OFFUTT. Yes, sir; I think so. I do not know. Sometimes the Government may lose on the contract system, but I couldn't say. I have sometimes felt that I could save a little if some things were not under contract; but I think that all the contracts are a mighty good thing.

Mr. SMYSER. Is this paper, which is headed "Proposal, supplies for the Government Hospital for the Insane," a copy of what you use in making up your estimates and submitting them for bids?

Mr. OFFUTT. Yes; I think I brought you over one of the next fiscal year, 1906; but it is a copy of the last one. I am sure of that. I do not know which I picked up this morning, but that is a copy.

Mr. SMYSER. This contains the specifications?

Mr. OFFUTT. Yes, sir.

Mr. SMYSER. And any bidder gets a copy of this?

Mr. OFFUTT. Yes; they get two of those. The bids are submitted in duplicate to the Department.

The CHAIRMAN. And this paper is supplied to you by the Interior Department?

Mr. OFFUTT. Yes, sir; those forms are gotten up by the Interior Department.

The paper referred to, headed "Proposal, supplies for the Government Hospital for the Insane," is filed herewith, marked "Exhibit Offutt No. 1, May 28, 1906." (See page 1720.)

Mr. SMYSER. Mr. Offutt, how long do you say you have been out there?

Mr. OFFUTT. This is my second time at the hospital. I have been there six years.

Mr. SMYSER. You know during the Spanish war there was something that got wrong with our beef.

Mr. OFFUTT. They called it embalmed beef, or something like that?

Mr. SMYSER. Yes. Have you had any such experience out here since you have been there?

Mr. OFFUTT. No, sir; not at all.

The CHAIRMAN. Do you frequently have to make complaints to the people who supply the beef?

Mr. OFFUTT. Yes, sir; we have, on a number of occasions, had to return things.

The CHAIRMAN. And is it rectified after it is returned?

Mr. OFFUTT. Yes, sir; sometimes in the case of canned goods, you can not tell until you open the goods. You can not see what the

appearance is. Sometimes you will see the heads are swollen, and we send them back. We always return things about which we are the least doubtful. If there is the least doubt about it, they go back. Just how many have gone back I do not know, but I think a record is kept at the institution. A record is kept of things that go back. I have been under the impression that the storekeeper has kept a list of things that have gone back. I do not know whether it is so or not.

Mr. SMYSER. If you want to buy, for instance, a lot of clothing, you go to the dealers here?

Mr. OFFUTT. Yes, sir; I go to the local dealers.

Mr. SMYSER. And you simply tell them the kind of clothing you want, and give them a general idea of the sizes?

Mr. OFFUTT. Yes, sir.

Mr. SMYSER. And do you have any sort of competition between the dealers here?

Mr. OFFUTT. Oh, yes, sir; we have competition between the dealers here.

Mr. SMYSER. For instance, if Saks & Company would say: "We will furnish you with so many suits at so much a suit," would you go to the other fellow and say: "You have got to do better?"

Mr. OFFUTT. Yes; I have done that sometimes.

Mr. SMYSER. In other words, in purchasing clothing in the open market, as you say you do here, it is your aim to get the best price for the material that you want in the city?

Mr. OFFUTT. Yes, sir; it is pretty well understood among the dealers here that I have a set price on clothing. I would like to say that we do not always get the strictly up-to-date clothing. Clothes that are on sale this fall I will probably get next fall. There may be some slight difference in the cut or make that makes it a little bit out of date. We pay on an average of \$6.50 for our suits, but we often get suits that are marked, as I have seen them marked, \$14, \$16, and \$18, which have been left over, and they had no sale for them, and any price would be a good price to them.

Mr. SMYSER. You discriminate as to the style?

Mr. OFFUTT. We have to, sometimes.

Mr. HAY. How much clothing does each person have a year, and how much do you pay a year for each of these persons?

Mr. OFFUTT. They average \$6.50 a suit.

Mr. HAY. But how many suits do they have a year?

Mr. OFFUTT. I probably buy about 600 suits in the course of the year.

Mr. HAY. I mean, how many suits does each patient have?

Mr. OFFUTT. Just as they need them; probably two or three. I don't know exactly; just as they are needed, I think.

Mr. HAY. Do you have a suit for each of them in the——

Mr. OFFUTT. Some of the patients of course use more than others. Some of them are more tidy.

Mr. HAY. Do they wear the same suit all the year round, winter and summer?

Mr. OFFUTT. No; I do not think any patient there could do that.

Mr. HAY. They have two suits a year generally, do they?

Mr. OFFUTT. Yes; and possibly three suits, some few of them.

Mr. HAY. They are not made to order, are they?

Mr. OFFUTT. No, sir; we get their measurements, chest and waist measurements, and order them in that way.

Mr. HAY. For each patient?

Mr. OFFUTT. Yes; each patient gets his size.

The CHAIRMAN. There is considerable clothing made at the asylum, is there not?

Mr. OFFUTT. Yes; we make quite a lot.

The CHAIRMAN. In the contracts made after advertisement by the Interior Department there are large quantities of clothing materials purchased, are there not?

Mr. OFFUTT. Yes, sir.

The CHAIRMAN. Which are made up in the asylum?

Mr. OFFUTT. Yes, sir; lots of cashmere and jeans and brown linens.

The CHAIRMAN. So that you do not have anything to do with the purchase of anything like all the clothing that is used there?

Mr. OFFUTT. No, sir.

The CHAIRMAN. The underclothing, you say, is made there?

Mr. OFFUTT. That is made in the hospital.

Mr. SMYER. Do you know how many suits of clothes are made up annually over there?

Mr. OFFUTT. No, sir; I do not know. That does not come under me.

Mr. HAY. You do not have charge of that department?

Mr. OFFUTT. No. Such data, however, is at the hospital, I am sure.

Mr. HAY. Who has charge of the farm?

Mr. OFFUTT. Mr. Green is the farm steward of the asylum proper. We have a small place 6 miles south of the institution in charge of a gentleman named Conner, where they have possibly fifteen patients.

Mr. HAY. And those patients are employed on that farm, are they?

Mr. OFFUTT. Yes, sir; some of them. I do not think that entire number is.

Mr. HAY. Does that man in charge of the farm tell you what supplies he wants?

Mr. OFFUTT. Yes; he sends a list over weekly to the storekeeper.

Mr. HAY. I see you spent on the farm last year about \$27,000.

Mr. OFFUTT. Yes; that includes farm implements for the whole institution.

Mr. HAY. That includes farm implements for the whole institution?

Mr. OFFUTT. Yes, sir.

Mr. HAY. Do you buy all these in the open market—feed, for instance?

Mr. OFFUTT. No, sir.

Mr. HAY. You have an item here of feed, \$12,204.

Mr. OFFUTT. No, sir; that is the annual contract.

Mr. HAY. You have \$2,600 for live stock?

Mr. OFFUTT. That is bought in open market.

Mr. HAY. That was bought in open market?

Mr. OFFUTT. Yes, sir.

Mr. HAY. Did you buy this?

Mr. OFFUTT. No, sir; I have not anything to do with buying the live stock.

Mr. HAY. That is done by this man at the farm?

Mr. OFFUTT. The farm steward and the superintendent, I think, arrange that between them. On one occasion when Doctor Richard-

son was there I did buy some cows. I bought a man's herd; but that was the only time.

Mr. HAY. But under the present administration you have not?

Mr. OFFUTT. No, sir.

Mr. HAY. I see here, "Hay and straw, \$8,866.71."

Mr. OFFUTT. That is also under contract.

Mr. HAY. That does not show very well what you buy for the farm, exactly. Here is "Manures, \$496.65."

Mr. OFFUTT. That is purchased in open market. We get bids on that.

Mr. HAY. "Plants and seeds, \$1,158.87."

Mr. OFFUTT. That is open-market purchase. I purchase those. We send out a list to the different bidders and take the cheapest of those.

Mr. HAY. The different farming items here, you say, include not only for the 450-acre farm, but for the implements used around the institution?

Mr. OFFUTT. Yes, sir.

Mr. HAY. Can you point out to me on this statement here what the farm brings in?

Mr. OFFUTT. No, sir; I can not give you that. We have such a memorandum at the hospital, however, covering all that.

Mr. SMYSER. Do you keep any hogs out there?

Mr. OFFUTT. No, sir; not now.

Mr. SMYSER. Why do you not?

Mr. OFFUTT. We had some trouble, as I remember, a year or two ago with them.

Mr. SMYSER. And what was the trouble?

Mr. OFFUTT. I think they had what is known as hog cholera.

Mr. SMYSER. You know the Agricultural Department over here now is able to cure hog cholera?

Mr. OFFUTT. I did not know that.

Mr. HAY. They may think they are.

Mr. SMYSER. The Secretary of Agriculture told me within a week that they have a sure cure for it.

Mr. HAY. I am glad to hear it.

Mr. SMYSER. What do you do with the offal and slop and dish-washings and so on? What becomes of that?

Mr. OFFUTT. We have a man in town here who takes it from the institution, I think, once or twice a week.

Mr. SMYSER. Why do you not put it into hogs?

Mr. OFFUTT. We have no hogs to put it into.

Mr. SMYSER. Why don't you get some?

Mr. OFFUTT. I have nothing to do with that. I could say that I guess and think, but I really do not know. I have no positive knowledge about that.

Mr. SMYSER. Do you know how many acres there are in your farm?

Mr. OFFUTT. I know the acreage of the institution, but I do not know how much of it is in the farm. I imagine there are 300 acres—250 or 300 acres.

The CHAIRMAN. Does most of the milk that is used in the hospital come from the farm?

Mr. OFFUTT. I think we are using about 25 gallons a day from outside, buying it outside.

The CHAIRMAN. Twenty-five gallons a day outside?

Mr. OFFUTT. Yes, sir.

The CHAIRMAN. I think it has been testified that 300 gallons a day are used there.

Mr. OFFUTT. We use about 300 gallons a day, yes, sir.

The CHAIRMAN. And about 275 gallons a day come from the farm?

Mr. OFFUTT. Yes; about that, I think. I think we have within the last month or two added somewhat to the outside purchase, but that does not come directly under me.

Mr. WALLACE. Is there nobody to help you make that \$60,000 purchase?

Mr. OFFUTT. No, sir; I do that practically alone.

Mr. WALLACE. There is nobody to pass judgment upon it?

Mr. OFFUTT. Excepting the storekeeper and the house steward.

Mr. WALLACE. There is nobody to approve it?

Mr. OFFUTT. Yes; the storekeeper and the stewards approve it.

Mr. WALLACE. At the asylum?

Mr. OFFUTT. Yes, sir; at the time it comes in.

Mr. WALLACE. What institution were you connected with as purchasing agent before your appointment to the Government Hospital for the Insane?

Mr. OFFUTT. I was connected with the Bloomingdale Asylum in New York City.

Mr. WALLACE. For about seven years?

Mr. OFFUTT. Yes, sir; nearly seven years. There I had the purchasing of supplies and the distribution of them. Here my duty ceases when I make the purchases.

Mr. WALLACE. When you were first employed as purchasing agent for the asylum——

Mr. OFFUTT. About six years ago——

Mr. WALLACE (continuing). What salary did you receive?

Mr. OFFUTT. The salary was then \$1,200 a year.

Mr. WALLACE. When were your services as purchasing agent dispensed with by Doctor Godding?

Mr. OFFUTT. I was not purchasing agent then. I was an attendant and general clerk in the office.

Mr. WALLACE. How long a time did the asylum do without a purchasing agent? Do you know?

Mr. OFFUTT. That position was created with me. There had not been a purchasing agent prior to my going to the hospital. Doctor Richardson created the position.

Mr. WALLACE. How long after the death of Doctor Godding were you appointed purchasing agent?

Mr. OFFUTT. Probably a year.

Mr. WALLACE. Were you endorsed by any board or anybody for the position?

Mr. OFFUTT. No, sir; I was recommended, I think, by some prominent people here and elsewhere for the position.

Mr. WALLACE. Individuals over the city?

Mr. OFFUTT. Yes, sir; I was not an applicant for the position.

Mr. WALLACE. You do not remember any of the names?

Mr. OFFUTT. Of the endorsers?

Mr. WALLACE. Yes.

Mr. OFFUTT. I am afraid I misled you in that. I was recommended through the Secretary's orders, I think of the Interior Department, to Doctor Richardson, who was looking for such a man to fill such a position.

Mr. WALLACE. You were recommended from the Interior Department?

Mr. OFFUTT. Yes. I think perhaps Doctor Richardson had questioned my former employer as to my qualifications and character, Doctor Lyon. I am under the impression that Doctor Richardson told me he had had some communication with some of his friends in reference to it.

Mr. WALLACE. What was your salary when you were reappointed to the office of purchasing agent by Doctor Richardson?

Mr. OFFUTT. At that time?

Mr. WALLACE. Yes.

Mr. OFFUTT. Twelve hundred dollars.

Mr. WALLACE. What raises have you had since?

Mr. OFFUTT. I have had one increase in salary.

Mr. WALLACE. When?

Mr. OFFUTT. Last October, of \$300 a year, making it \$1,500.

Mr. WALLACE. That is the last raise you received?

Mr. OFFUTT. That is the last one; yes, sir.

Mr. WALLACE. How many rooms do you occupy?

Mr. OFFUTT. Two.

Mr. WALLACE. Can you tell what the cost of refitting and repairs, and so forth, was, if you had them repaired and refitted?

Mr. OFFUTT. Of the rooms?

Mr. WALLACE. Yes.

Mr. OFFUTT. It was done at my own expense. I think the hospital furnished about \$74 worth of stuff for my rooms. I have kept a rather careful list of that, but I do not happen to have it with me.

Mr. WALLACE. You mean the asylum furnished it?

Mr. OFFUTT. Yes, sir. They did that much, as I say, furnishing carpets, and so forth.

Mr. WALLACE. How much; about \$70?

Mr. OFFUTT. About \$74, I believe.

Mr. WALLACE. Do you use an electric automobile in your traveling?

Mr. OFFUTT. Yes, sir; I did use one up to within a few months ago.

Mr. WALLACE. Was that your own, or was it furnished?

Mr. OFFUTT. No, sir; it belonged to the Government.

Mr. WALLACE. It was furnished there at the asylum?

Mr. OFFUTT. Yes, sir.

Mr. BARCHFELD. It belongs to the institution?

Mr. OFFUTT. It belongs to the institution.

Mr. WALLACE. Do you know how many Doctor White has out there?

Mr. OFFUTT. They have had three in the institution, but one is disabled. It has been made over half a dozen times by the engineer. It has been a sort of an experiment, I believe. That is the one I have been using up to within a few months.

Mr. WALLACE. And then there are two others?

Mr. OFFUTT. Yes, sir.

Mr. WALLACE. They all belong to the institution, I understand?

Mr. OFFUTT. They all belong to the Government.

Mr. WALLACE. Do you know about when they were purchased, and the prices?

Mr. OFFUTT. They were legacies that were left there by Doctor Richardson, I believe. He purchased the first one or two, I think.

Mr. WALLACE. And the third?

Mr. OFFUTT. The third was purchased under Doctor White's administration.

Mr. WALLACE. Do you know about what price was paid for it?

Mr. OFFUTT. I think about \$850. I am not sure about that. Maybe it was \$750. There was some question about a top, as to the difference in price with or without a top. I think it was \$850.

Mr. WALLACE. Can you approximate the cost of repairing the automobile during the last ten or twelve months out there?

Mr. OFFUTT. I haven't it with me. Do you say the cost of repairing or the cost of repairs?

Mr. WALLACE. Repairs.

Mr. OFFUTT. I can not tell you. I really do not know. Like all other up-to-date automobiles, they are frequently out of order, and they need repairing very often.

Mr. WALLACE. Can you estimate, in the general use of those automobiles out there, approximately what it would cost to keep them in good shape, good repair?

Mr. OFFUTT. No, sir; I could not tell that, indeed. We have an experienced electrician there who does that sort of work, but the cost I am not able to state.

Mr. WALLACE. You do not know anything about the time that is spent on these machines or anything about it?

Mr. OFFUTT. No, sir, I do not; but quite considerable, though, I should say. I have not used this machine for several months, and I do not know whether I shall ever use it again.

Mr. WALLACE. In the financial report of the Government Hospital for the Insane, under the head of "Incidental work," on pages 23 to 28, it is noted that about \$76 was paid to you during the year for incidental work. Do you know anything about that?

Mr. OFFUTT. Yes, sir. They are my necessary expenses, car fare and lunches in the city, in making purchases for the hospital. I believe that is the custom with most departments.

Mr. WALLACE. Was that in addition to your salary?

Mr. OFFUTT. That was in addition to my salary; yes, sir. It amounts to about, I guess that is about right, about \$6 a month. I think it is \$1.50 a week, or something like that.

Mr. WALLACE. You have put it at \$76. In this same financial report is noted, under the head of vehicles and repairs, item paid to the Washington Electric Vehicle Transportation Company over \$311. Do you know whether that was for repairs of the automobile?

Mr. OFFUTT. \$311?

Mr. WALLACE. \$311.

Mr. OFFUTT. That sounds like a new battery. I don't know that it is, but the battery would cost about that. We sometimes turn in old material and get a battery very much cheaper. I think the last one cost about \$200. I am not positive whether I am making a correct statement about the \$311. It might have been for general repairs, but I doubt it very much.

Mr. WALLACE. What do you mean by the battery?

Mr. OFFUTT. The plates and the jars. These are electric machines.

Mr. WALLACE. A new plate that you can apply to the old machine?

Mr. OFFUTT. Yes, sir; sometimes we do that.

Mr. WALLACE. What is the custom about buying turkeys for Thanksgiving Day?

Mr. OFFUTT. That had been the custom, I think, for many years. It was the custom when I went there, but in the last two years we have cut them out on Thanksgiving Day and have given them at Christmas time. Before we gave them at both times.

Mr. WALLACE. This refers to 1904 and 1905?

Mr. OFFUTT. Yes.

Mr. WALLACE. So you quit that custom and took up the dining custom?

Mr. OFFUTT. Yes, sir. Turkeys are constantly advancing in price, and they are getting scarcer all the time.

Mr. WALLACE. It cost you more to keep up the turkey custom than it did the dining custom?

Mr. OFFUTT. Yes; a great deal more.

Mr. WALLACE. Was an automobile purchased that year, 1904 or 1905, for the superintendent, Doctor White, and if so, what was paid for same?

Mr. OFFUTT. There was one purchased, I think, in 1904, or about that time; but I knew nothing of the price of that one.

Mr. WALLACE. Do you know what was paid for it?

Mr. OFFUTT. I stated awhile ago that I thought about \$850.

Mr. WALLACE. Do you invite competitive bids for the furnishing of supplies? That question was answered, I believe, about \$6,000.

Mr. OFFUTT. We do that wherever it is practicable. Sometimes the orders are emergency orders and it is not possible to do that.

Mr. WALLACE. You have already named the classes of goods that you purchased.

Mr. OFFUTT. Yes.

Mr. WALLACE. You stated also, I believe, that you knew nothing about the newspaper advertisements?

Mr. OFFUTT. No, sir.

Mr. WALLACE. That did not come under you?

Mr. OFFUTT. It did not come under me. I have seen the advertisement, of course.

Mr. WALLACE. Will you name some paper in which you have seen it?

Mr. OFFUTT. The Washington Post, I think, had them in, and also the Star and most likely the Times. As far as I know they do not discriminate. They give them to all the local papers.

The CHAIRMAN. At any rate, that is done by the Interior Department?

Mr. OFFUTT. That is done by the Interior Department.

Mr. WALLACE. That advertisement was under the contract system of the Interior Department?

Mr. OFFUTT. Yes, sir.

Mr. WALLACE. You never advertised for any bids yourself?

Mr. OFFUTT. No, sir; I have never advertised. I solicited a number of bids, but I never advertised.

Mr. WALLACE. You do not know what the custom was under Doctor Godding's administration?

Mr. OFFUTT. I think it was practically about what it is now, with the exception that they did not have a purchasing man at that time. Their purchasing was done then by the physicians and clerks, perhaps. I do not know who did it.

Mr. WALLACE. Were those bids passed on? Were they published in the newspapers and passed on by a board?

Mr. OFFUTT. Yes; that was the custom then. I think they started that twenty-two or twenty-three years ago, of advertising. I think a list was gotten up then.

Mr. WALLACE. By Doctor Godding and two officials from the Department of the Interior, I believe.

Mr. OFFUTT. Yes.

Mr. WALLACE. Under such a plan could the services of a purchasing agent be dispensed with out there? Could the asylum dispense with the purchasing agent?

Mr. OFFUTT. Yes, they could dispense with one, I imagine, if they cared to do so. I should think, however, it is a good plan to have one.

Mr. WALLACE. Do you think it would be injurious or beneficial to the institution?

Mr. OFFUTT. I think it is a very good thing for the institution to have a man who can look out for that end of it.

Mr. WALLACE. It suits you personally very well?

Mr. OFFUTT. It suits me personally just as well.

Mr. WALLACE. Do you know how many carriages, buggies, and horses, automobiles, and other vehicles are kept at the institution for the personal use of Doctor White?

Mr. OFFUTT. I could not answer that. The man in charge of the stable would have all that information. I could state it in a general way; but I do not want to guess at it.

Mr. WALLACE. You would have to guess at it?

Mr. OFFUTT. Yes.

The CHAIRMAN. Do you know about any of these automobiles, buggies, or other vehicles being used for other purposes than for the business of the asylum?

Mr. OFFUTT. No, sir.

The CHAIRMAN. When you go to town in an automobile, you go to town for the purpose of purchasing supplies for the asylum?

Mr. OFFUTT. Yes, sir, absolutely; or nearly so.

Mr. WALLACE. You spend about \$6 a month on cars in going out and attending to your business?

Mr. OFFUTT. That includes car fare and my lunches in town, a matter of 15 or 20 cents.

Mr. WALLACE. Would it not be better or cheaper to use one of those automobiles out there? Could you not save that?

Mr. OFFUTT. I do this whilst I am using the automobile.

Mr. WALLACE. You use the automobile and you do that, too?

Mr. OFFUTT. Oh, yes.

Mr. WALLACE. You have the car and the automobile, both?

Mr. OFFUTT. Oh, I did not understand your question. Sometimes the auto is out of commission, and then I use the cars. I prefer using the cars. It is not a great deal of pleasure using automobiles. It gets to be an irksome sort of a thing sometimes. I find it so, and I vary the monotony by using the street cars. They are uncertain

and far between, as far as passing our institution is concerned; but I manage to use them sometimes.

Mr. WALLACE. You just make that a matter of choice?

Mr. OFFUTT. I make that a matter of choice.

Mr. WALLACE. You could have had the automobile most of those times?

Mr. OFFUTT. I could sometimes have had it; yes, sir.

The CHAIRMAN. How many times do you make these purchases in town?

Mr. OFFUTT. I usually average four days a week.

The CHAIRMAN. And your expenses to do that, for lunches and car fare, when you do not use the automobile, are about \$6 a month?

Mr. OFFUTT. About \$1.50 a week; yes, sir. I have vouchers to show for it.

Mr. BARCHFELD. You do not have automobiles at the institution for the sake of recreation and having races to Baltimore and back, do you?

Mr. OFFUTT. No, sir; not at all. They are used for business purposes.

Mr. BARCHFELD. They are used absolutely as an indispensable adjunct to the proper management of the institution?

Mr. OFFUTT. Yes, sir. For instance, I oftentimes have as many as thirty places to go to in a day, looking up purchases of supplies for the institution. It is a mighty big problem, trying to feed 3,000 people, and it necessitates a great deal of running around to do it.

ADDITIONAL TESTIMONY OF DR. I. W. BLACKBURN.

Dr. I. W. BLACKBURN, having been heretofore sworn, was examined and testified as follows:

Mr. HAY. Doctor, I hold in my hand a copy of the law creating this anatomical board, which provides "that there shall be, and is hereby, created, in and for the District of Columbia, a board for the control of the dead human bodies hereinafter described, and for the distribution of such bodies among and to the schools in said District," etc. Then it further provides "that every public officer, agent, and servant of any and every almshouse, prison, jail, asylum, morgue, hospital, and other public institutions and offices having charge or control of dead human bodies requiring to be buried at public expense, shall notify said anatomical board." (See page 1740.)

Did you know that there was a law of this kind?

Doctor BLACKBURN. Yes, sir.

Mr. HAY. I understood you to say when you were on the stand a moment ago that you did not.

Doctor BLACKBURN. I thought you referred to the anatomical law in regard to dissecting material at colleges.

Mr. HAY. It does not say dissecting material, but "for the control of the dead human bodies."

Doctor BLACKBURN. I did not understand it then.

Mr. HAY. Did you ever inform this anatomical board of any of these dead human bodies that were under your control?

Doctor BLACKBURN. I have no authority to do that.

Mr. HAY. You have no authority to do that?

Doctor BLACKBURN. No, sir.

Mr. HAY. Who has authority to do it?

Doctor BLACKBURN. The superintendent is the only one that I know of.

Mr. HAY. The reason that I call attention to it is that in my judgment this law controls the hospital for the insane as well as all the other various institutions, and I think that some law ought to be passed which would give to the authorities of the hospital for the insane the control of the dead human bodies described here for their scientific purposes; but there does not seem to be any law which gives you the privilege to do that. If you know of any such law I would be glad to have you call attention to it.

Doctor BLACKBURN. I know of no such law, further than you have read. I remember on one or two occasions, and possibly more, Doctor Richardson turned over possibly two or more bodies to the anatomical board.

Mr. HAY. This law was not passed until 1902. It was approved April 29, 1902, and after it was approved you say he did turn over some?

Doctor BLACKBURN. Yes, I think I recall about two cases that were turned over. I could not be sure. I know of one, but I do not know of more than one.

Mr. HAY. That is all.

Mr. BARCHFELD. Do you know, Doctor, whether the various schools of medicine in this city have any trouble in securing bodies for dissection?

Doctor BLACKBURN. By hearsay, I think they have some trouble. I do not know positively, but I think they have some trouble in getting sufficient material.

Mr. HAY. These things have to be done by law, that is all. There is no law that authorizes the authorities of this asylum to hold these autopsies, and there ought to be a law.

The CHAIRMAN. They ought to be authorized probably.

Mr. HAY. They ought to have authority to utilize their own material for their own scientific purposes, and I think Congress would pass a law of that kind. Clearly there is not any law that authorizes it. It has grown up by custom. That is all.

The committee (at 4.30 o'clock p. m.) adjourned until Wednesday, May 30, 1906, at 10.30 o'clock a. m.

HOUSE OF REPRESENTATIVES, *May 31, 1906.*

The committee met at 10 o'clock a. m.

Present: Messrs. Olcott (chairman), Smyser, Barchfeld, Hay, and Wallace.

Present also: Doctor White, Mr. Fenning, and others.

TESTIMONY OF WILLIAM SCHONEBERGER.

WILLIAM SCHONEBERGER, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Mr. Schoneberger, do you reside in Washington?

Mr. SCHONEBERGER. Yes, sir.

The CHAIRMAN. What is your occupation?

Mr. SCHONEBERGER. Morgue master of the District.

The CHAIRMAN. Have you, in such position, anything to do with autopsies?

Mr. SCHONEBERGER. I assist at all autopsies, under the coroner.

The CHAIRMAN. Do you have anything to do with the autopsies at St. Elizabeth's?

Mr. SCHONEBERGER. No, sir.

The CHAIRMAN. Are those reported to you in any way so that you know anything whatever about them?

Mr. SCHONEBERGER. No, sir.

The CHAIRMAN. How extensive are your duties? Are they solely in regard to matters that come before the coroner of the District?

Mr. SCHONEBERGER. Yes, sir.

The CHAIRMAN. Do you know under what law you operate?

Mr. SCHONEBERGER. In the duties of the morgue?

The CHAIRMAN. In the performance of these autopsies.

Mr. SCHONEBERGER. The autopsies are ordered by the coroner, and I notify the deputy coroner, and we perform them.

The CHAIRMAN. Is there anybody else you notify? Do you give any notification to the anatomical board?

Mr. SCHONEBERGER. No, sir; they would have nothing to do with that. I am a member of the anatomical board.

The CHAIRMAN. What does the anatomical board do?

Mr. SCHONEBERGER. The anatomical board is to furnish material for the different colleges of the District, the Army and Navy Medical School, and the Dental School.

The CHAIRMAN. You mean they furnish bodies?

Mr. SCHONEBERGER. They are reported to me from the different institutions, from the Washington jail, the hospitals, and asylums of all kinds in the District. If a body is there twenty-four hours and is liable to be buried at the expense of the Government it must be turned over to the anatomical board.

The CHAIRMAN. Do not such notifications as that come to you from St. Elizabeth's?

Mr. SCHONEBERGER. They have not for a long number of years. It used to be, but it has not for several years. We never get any from there.

Mr. HAY. How long has it been, Mr. Schoneberger, since you received any notice from there?

Mr. SCHONEBERGER. I do not think I have received any notice in the last three years. I don't think so. I would not give the date exactly.

Mr. HAY. Did you at any time get any material from there?

Mr. SCHONEBERGER. Yes, sir; I used to get material from there, sir.

The CHAIRMAN. How long have you been a member of this anatomical board?

Mr. SCHONEBERGER. I have been a member about six or seven years. This last law is a little different from the old law, sir. This last law is in 1902. It is compulsory upon the hospitals and asylums to notify me, under a penalty of a fine or six months in the work-house. I have a copy of that here with me, if you would like to see it.

The CHAIRMAN. Yes; I would like to see that, please.

Mr. SCHONEBERGER. I have the whole by-laws with me.

The CHAIRMAN. Have you ever communicated with the authorities connected with St. Elizabeth's hospital in regard to this matter?

Mr. SCHONEBERGER. Through my secretary. I am the agent, and then there is a secretary. The whole board is in this pamphlet. This will give you the whole details of the board and what is required of all the institutions that come in control of dead bodies.

Mr. HAY. Mr. Schoneberger, do you regard that the Government Hospital for the Insane is included under this law?

Mr. SCHONEBERGER. Yes, sir; it says all asylums that are in the District.

Mr. HAY. You have had some communications from them?

Mr. SCHONEBERGER. I have had bodies from there, yes, sir, for that purpose, and they have been used. The great trouble here is, while we never bother them so much, all the bodies have been posted and cut so bad that it wouldn't do any good to us. It would be more trouble to preserve them than it would be any good to the students afterwards. All the vital parts would be cut and disfigured so we would get very little use of them. That is one reason we never run out on them very much. We never could get any good material.

Mr. HAY. I understood you to say that you had applied to them through the Secretary.

Mr. SCHONEBERGER. Yes, sir.

Mr. HAY. What was the result of that application?

Mr. SCHONEBERGER. That I would be unable to answer, sir.

Mr. HAY. Why would you be unable to answer it?

Mr. SCHONEBERGER. I did not ask him what the answer to his communication was.

Mr. HAY. You did not?

Mr. SCHONEBERGER. No, sir; because I heard nothing from the asylum, and just concluded the bodies was no good or there was neglect in doing their duty. I didn't know which.

The CHAIRMAN. Has more than one communication been sent from your board to the hospital, so far as you know?

Mr. SCHONEBERGER. That I would be unable to say, sir. I don't know. The only communication I make is to notify any friends or relatives of a deceased body I have in my control, and report to the anatomical board. Each and every body I must report on what I have done, who I have notified, or advertised.

The CHAIRMAN. Is this act called Public No. 87, which is printed in this book, the law under which you act?

Mr. SCHONEBERGER. That is the law, yes, sir. It is supposed to be the exact wording of it, sir.

Mr. HAY. That is the law of 1902, is it?

Mr. SCHONEBERGER. Yes, sir.

Mr. HAY. And there was a law previous to that?

Mr. SCHONEBERGER. There was an old law previous to that. It came through the health officer, but it left the asylums and hospitals a good deal to their own discretion. But this one is compulsory.

The CHAIRMAN. Was there not a law of 1905 also?

Mr. SCHONEBERGER. There was an old law, but as I say it was not compulsory.

The CHAIRMAN. But I mean in 1905, subsequent to this.

Mr. SCHONEBERGER. There is a copy of the law in that book.

Mr. SMYSER. The law of 1905 was here the other day.

Mr. HAY. That was not about the anatomical board. That was about the four-hour business.

Mr. SCHONEBERGER. That four-hour business comes under the health officer. It is about preserving and embalming bodies. That does not refer to the anatomical board. There is no law later than 1902. (See page 1737.)

The CHAIRMAN. There is no law later than 1902?

Mr. SCHONEBERGER. No, sir; there has nothing been done since then.

(The pamphlet above referred to is marked for identification "Schoneberger No. 1.") (See page 1737.)

Mr. BARCHFELD. Do you get sufficient material from these hospitals and asylums to keep the universities and medical colleges in material?

Mr. SCHONEBERGER. Some years we are short.

Mr. BARCHFELD. What do you do in case you are short?

Mr. SCHONEBERGER. We have to do without.

Mr. BARCHFELD. You do not pay anything for your material, do you?

Mr. SCHONEBERGER. No, sir.

Mr. BARCHFELD. Who appoints this anatomical board?

Mr. SCHONEBERGER. I think in the first of this law, it was in the health office. The health officer was then at the head of it, and he called the board; and it says there that two members from each institution will be the board.

Mr. BARCHFELD. Shall constitute the board?

Mr. SCHONEBERGER. Shall constitute the board; yes, sir.

Mr. BARCHFELD. How many members have you on the board?

Mr. SCHONEBERGER. I can tell you from this. There are different institutions here, sir.

Mr. BARCHFELD. Just read the different institutions.

Mr. SCHONEBERGER. Do you want the names of the members?

Mr. BARCHFELD. No, sir; I want the names of the institutions.

Mr. SCHONEBERGER. The Columbian University, which is now the George Washington University, the Georgetown University Medical and Dental School, the Howard University, Dental Department, the National University, Medical and Dental Department, the United States Army Medical School, the United States Navy Medical School. Those are the institutions.

Mr. BARCHFELD. Those are all institutions of learning?

Mr. SCHONEBERGER. Yes, sir.

Mr. BARCHFELD. What are the hospitals that furnish your material?

Mr. SCHONEBERGER. These are the ones that receive the remains. You ask me about being short.

Mr. BARCHFELD. Yes.

Mr. SCHONEBERGER. These are the ones that use the material that we receive from the different hospitals.

Mr. BARCHFELD. What hospital do you get your material from?

Mr. SCHONEBERGER. They are all supposed to notify me when they come in control of them. There is none that is exempt at all; but the most we get them from is the Freedman's Hospital and the Washington Asylum. We get a few from Providence. We get a few from all of them, but those are the principal ones we get.

Mr. BARCHFELD. What did you say the first one was?

Mr. SCHONEBERGER. Freedman's Hospital, and that is under the control of the Interior Department, the General Government. The Washington Asylum is under the control of the District government.

It furnishes most of the material, because it seems to be the lower class, the incurables.

Mr. BARCHFELD. You are not opposed to post-mortems, are you?

Mr. SCHONEBERGER. No, sir.

Mr. BARCHFELD. You hold a few yourself?

Mr. SCHONEBERGER. Yes, sir.

Mr. BARCHFELD. You are not a medical man?

Mr. SCHONEBERGER. No, sir.

Mr. BARCHFELD. You merely assist the acting coroner or the coroner's physician?

Mr. SCHONEBERGER. Yes, sir; I am the morgue master.

The CHAIRMAN. There are no representatives on the anatomical board from these hospitals that use this material, are there?

Mr. SCHONEBERGER. The material we get from the hospitals; but they don't use them, you see.

The CHAIRMAN. I mean are there any representatives from these hospitals where you get these bodies?

Mr. SCHONEBERGER. Yes, sir; I think there are one or two, sir. The president of the Zoological Park, he is one of the members. Doctor Shute is a member of the board, and he is also in charge of the United States jail. We get material from there. Doctor Woodward, the health officer, is a member.

The CHAIRMAN. How many bodies do you get in the course of a year?

Mr. SCHONEBERGER. We get anywhere from eighty to a hundred a year. We generally get that many. Up to the present time this year the number is 97.

The CHAIRMAN. That is a pretty good year. The year is not half over.

Mr. SCHONEBERGER. Last year we had a hundred preserved. I preserve the material and keep it the year round, or else we would be short. Doctor Lamb is a member. He is attached to the Freedman's Hospital, and also in the medical department of the United States Army, the medical school. He is also attached there. Dr. Ford Thompson—he is a member of different hospitals—an attaché of different hospitals.

Mr. SMYSER. I understood you to say, Mr. Schoneberger, that you regarded the act of April 29, 1902, as applicable to St. Elizabeth's Hospital.

Mr. SCHONEBERGER. Yes, sir; that is my impression.

Mr. SMYSER. Under section 2 of that act, do you think it is the duty of the authorities there, when a person dies, to notify your board?

Mr. SCHONEBERGER. The law specifies twenty-four hours after death. If the body is liable to be buried at the expense of the Government or the District I should be notified.

Mr. SMYSER. With that addition to the question, under section 2 of the act of 1902, do you construe the act to mean that it is the duty of the authorities at the hospital to notify your board when a person dies there who is likely to be buried at public expense?

Mr. SCHONEBERGER. Yes, sir; I believe so.

Mr. SMYSER. Under this act, if the authorities there desired a body of that kind for post-mortem, and would notify you and your board would take charge of it, how would they get the body back?

Mr. SCHONEBERGER. They wouldn't get it back, sir. If it come in our control once they would have no right to use it in dissection, but they would have a right to post that body if they didn't understand the cause of death. But they would have no right to use that body after we had been notified and it come in our control, because they are not a medical institution.

Mr. SMYSER. That is just what I want to get at. In other words, this law deprives that great institution, as you construe the law, from post mortems for the benefit of science, but compels them to submit their dead bodies to your board and you assign them to other institutions.

Mr. SCHONEBERGER. Only dead bodies, by this law, that would be buried at the expense of the District—not all bodies.

Mr. SMYSER. I am talking about certain bodies. As you construe this law, on the mere notification to you they are deprived of that body, and there is no way by which your board could reassign that dead body to that institution, is there?

Mr. SCHONEBERGER. No, sir; if they want any information or experience for the benefit of this body they would have to go to the different colleges it is assigned to and get it.

Mr. SMYSER. Do you think that is the proper construction of that act—the construction you have given?

Mr. SCHONEBERGER. That is my belief, sir.

Mr. SMYSER. You notice the act is headed "An act for the promotion of anatomical science and to prevent the desecration of graves in the District of Columbia"?

Mr. SCHONEBERGER. Yes, sir.

Mr. SMYSER. And such construction would deprive the institution out there of every dead body that was not claimed by friends or that was liable to be buried at the public expense?

Mr. SCHONEBERGER. Yes, sir. It would not deprive them of finding out the cause of death, if they did not understand it by the diagnosis of the case. We can not compel them not to do that work.

Mr. SMYSER. I take it that this law means they can not chop the body up and then have a body to deliver to you. That is not your construction of it, is it?

Mr. SCHONEBERGER. If they knew the cause of death they would not have any right, I don't believe, to hold a post mortem.

Mr. SMYSER. Put it this way: A patient is there who is suffering in some manner, and it is an interesting case, and he dies. He is liable to be buried at the public expense. Under your construction of the law, if it was evident, for instance, that he died from heart failure, they would have no right to hold a post mortem, although there was no friend to claim the body and he would be buried at the public expense?

Mr. SCHONEBERGER. If they was not satisfied with the man's death they would have the right to hold a post mortem, sir.

Mr. SMYSER. They can pretty readily determine the cause of death if a fellow dies from heart disease, for instance, sitting in a chair, and all at once is gone. It is the custom now to say it is heart failure.

Mr. SCHONEBERGER. Yes, sir.

Mr. SMYSER. In such an instance as that, as you construe this law, the authorities out there would be required, first, to notify you that they have that dead body in their control, and upon said notification, they are required to submit that body to the anatomical board?

Mr. SCHONEBERGER. Yes, sir.

Mr. SMYSER. And having submitted the body to the anatomical board, there is no way by which the institution can conduct its own post mortem for any purpose whatever. If they want to gather any information for a scientific purpose from a post-mortem of that body, they have got to go to the institution to which your board has assigned the body. Is that it?

Mr. SCHONEBERGER. I don't quite understand you. If they had signed the certificate giving the cause of death, then they could not get this body back any more; but, as I say, if they were not satisfied with the cause of this body's death, they would have a right, before the twenty-four hours was up—

Mr. SMYSER. I want to put this beyond peradventure. I am coming back to an instance where a man dies and even a layman would say it was heart failure. They do not need any examination to determine to the satisfaction of the authorities as to the cause of death; but in such case they have to notify you, according to your construction of the law, that they have that body, and they can not get it back?

Mr. SCHONEBERGER. That is, if it is liable to be buried at the expense of the Government; yes, sir.

Mr. SMYSER. That would be putting the institution there at a disadvantage, would it not?

Mr. SCHONEBERGER. I don't think so. If they are satisfied of the cause of the man's death, and they turn it over to us in twenty-four hours after death, that would relieve them.

Mr. BARCHFELD. The pathologist on the stand the other day said that he only held post-mortems on about one-half the deaths in the institution.

Mr. HAY. Mr. Schoneberger, how many hospitals are there in the District? I know of the Providence, the Freedman's Hospital, Garfield Hospital.

Mr. SCHONEBERGER. There is the Georgetown University Hospital, the George Washington University Hospital.

Mr. HAY. Are not all those institutions under the same rule as this institution about which Judge Smyser has just been speaking?

Mr. SCHONEBERGER. Yes, sir.

Mr. HAY. And would not they be placed at the same disadvantage at which that institution is placed?

Mr. SCHONEBERGER. Yes, sir; I have got material from every one of them.

Mr. HAY. You do not make any discrimination against the hospital for the insane any more than you do against the others?

Mr. SCHONEBERGER. None whatever; no, sir.

Mr. HAY. There is no special reason, is there, why the staff, say at the Freedman's Hospital, should not have the privilege of a post-mortem examination over the people who die there more than the hospital for the insane?

Mr. SCHONEBERGER. Not a bit, sir. They do it there.

The CHAIRMAN. So that other hospitals sometimes do not send you all the bodies you think you are entitled to receive?

Mr. SCHONEBERGER. No, sir. You take the general hospitals, like the George Washington University. They have a higher class of people. It is very seldom that kind of material comes to us. Every body is buried. Friends are fixed so that they can take charge of the bodies;

but in hospitals like Freedmen's and the Washington Asylum there is more material comes from there. They are a poorer class of people.

The CHAIRMAN. You are not a physician, are you?

Mr. SCHONEBERGER. No, sir.

The CHAIRMAN. Are you a lawyer?

Mr. SCHONEBERGER. No, sir.

Mr. SMYER. Then you are dealing with dead bodies as an ordinary layman; is that it?

Mr. SCHONEBERGER. Yes, sir.

TESTIMONY OF DR. WILLIAM A. WHITE.

Dr. WILLIAM A. WHITE, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Doctor White, how old are you?

Doctor WHITE. Thirty-six.

The CHAIRMAN. Where did you study medicine?

Doctor WHITE. At the Long Island College Hospital, Brooklyn, N. Y.

The CHAIRMAN. When did you graduate?

Doctor WHITE. In 1891.

The CHAIRMAN. What was the first position you held after you graduated?

Doctor WHITE. I was ambulance surgeon at the Eastern District Hospital, in Brooklyn.

The CHAIRMAN. How long were you in that position?

Doctor WHITE. I was at the Eastern District Hospital about six months. I was alternate—each other month ambulance surgeon and each other month house surgeon.

The CHAIRMAN. Where did you go from there?

Doctor WHITE. I went to the medical staff of the almshouse and workhouse hospitals, on Blackwells Island.

The CHAIRMAN. How long were you there?

Doctor WHITE. I was only there a short time—only a few weeks.

The CHAIRMAN. Where did you go then?

Doctor WHITE. From there I went on the house staff, as house physician, to the Long Island College Hospital, where I graduated, and I was there as house physician for three months and as house surgeon for three months.

The CHAIRMAN. Then where did you go?

Doctor WHITE. Then I went to the Binghamton State Hospital, Binghamton, N. Y., as assistant physician. I was there approximately eleven years and a half. From there I came to Washington.

The CHAIRMAN. You were superintendent at Binghamton at one time, were you?

Doctor WHITE. No, sir. When I came here I was occupying the position of first assistant physician, and had been for about three years in that position.

The CHAIRMAN. When did you come to St. Elizabeth's?

Doctor WHITE. October 1, 1903.

The CHAIRMAN. And you have been the superintendent of St. Elizabeth's ever since?

Doctor WHITE. Yes, sir.

The CHAIRMAN. How did the hospital at St. Elizabeth's, when you first went there, compare in size with its present condition? Were there as many patients there?

Doctor WHITE. I think, perhaps, we have a couple hundred more patients now than it did then. It has increased.

The CHAIRMAN. To return a moment, what were your duties at Binghamton when you were first assistant physician there?

Doctor WHITE. I had charge of the female receiving service. I looked after all the patients who were received in the hospital. I looked after the legal part of it, the medical certificates, and saw to sending for them. You know, in New York State when a medical certificate is made out and a patient properly committed, the authorities where the patient is taken insane do not bring them to the hospital. The hospital sends for them. I looked after the transfer of all the insane to the hospital. I had general charge of all the outside departments, looking after, making regular inspections of the different shops and power houses and one thing and another, and I hired all the employees and acted in the capacity of superintendent during the superintendent's absence.

The CHAIRMAN. How large a hospital was the Binghamton Insane Asylum when you were there?

Doctor WHITE. I think there were approximately 1,500 patients.

The CHAIRMAN. Where did those patients usually come from?

Doctor WHITE. They came from the nine counties, including the county in which Binghamton is situated, Broome County, and eight adjoining counties. Each hospital in New York State has an assigned district from which they draw all their patients. They had nine counties when I left.

The CHAIRMAN. Were any of these patients pay patients?

Doctor WHITE. Practically none of them. There was occasionally a private patient, but practically none of them.

The CHAIRMAN. They were both male and female and both white and colored, I suppose?

Doctor WHITE. Very few colored. Practically all white. There was about an even proportion of the sexes.

The CHAIRMAN. Were there any criminal insane there?

Doctor WHITE. No, sir.

The CHAIRMAN. They all went to Matteawan?

Doctor WHITE. The criminal insane went to Matteawan, and the insane criminal went to Dannemora.

The CHAIRMAN. What is the difference between the criminal insane and the insane criminal?

Doctor WHITE. An insane criminal is a person who is convicted and then is found to be insane. The criminal insane are insane people with criminal tendencies who have not been convicted of crime.

Mr. SMYSER. Is that definition or distinction, as you give it, generally recognized throughout the country?

Doctor WHITE. I think so; yes, sir.

The CHAIRMAN. Under which category does a man come who has been indicted and is afterwards examined by order of the court who is trying him?

Doctor WHITE. He is a criminal insane. He is not yet a criminal. He can not be a criminal until he has been convicted in court.

The CHAIRMAN. Doctor, will you give, generally, your duties in connection with St. Elizabeth's Asylum? In the first place, of course, I appreciate that being superintendent means you are absolutely responsible for the entire conduct of the asylum, are you not?

Doctor WHITE. Yes, indeed.

The CHAIRMAN. Both in regard to the patients themselves, the buildings, and the care of the buildings. I would like to have you describe your duties as superintendent minutely, as well as you can.

Doctor WHITE. I am responsible for everything there, everything pertaining to the care, custody, and treatment of the insane, everything pertaining to the buildings and grounds, everything pertaining to the financial administration of the institution. I am also constituted by statute not only superintendent, but disbursing officer, and I have also recently been appointed as a matter of convenience to the Department of Justice a special disbursing officer for the Department of Justice also; so that I may, without bothering the Department of Justice, pay to discharged criminals gratuities and arrange for their going to the last place of residence after they leave the institution. I have everything to do with the supervision of the care of the patients and with the employment and separation from the service of everybody who has any official relation with the institution. Those are in general the duties as outlined by the statute. That is practically all that the statute outlines. The rest, of course, is left for me to interpret my duties as I see fit.

The CHAIRMAN. How will you begin in regard to the employment of the medical staff?

Doctor WHITE. That is done with the assistance of the Civil Service Commission. For instance, we are short now upon our medical staff and have been for some little time. Some months ago I called upon the Civil Service Commission and set forth my needs in that direction and requested them at the earliest possible moment after the commencement exercises at the medical colleges to hold a competitive examination for a medical interne, so that I might fill vacancies on the medical staff. That examination will be held next week.

The CHAIRMAN. That examination is held entirely apart from you, is it not?

Doctor WHITE. I have nothing to do with it further than to prescribe the qualifications which I desire, as to age, sex, experience if I wish, etc.

The CHAIRMAN. Then the examination having been held and you desiring to make an appointment, what is the method of procedure?

Doctor WHITE. I request from the Civil Service Commission, through the appointment division of the Interior Department, a certification of eligibles, and three names are sent to me, from which I may choose one or all, as I see fit. Of course I usually choose one, and then send and ask for another certification, so as to get the maximum number of names always from which to make my choice.

The CHAIRMAN. Suppose none of the three that are certified to you by the Civil Service Board are satisfactory to you?

Doctor WHITE. If I have good and sufficient reasons, reasons which are good and sufficient to the Civil Service Commission, I can reject them all and ask for another certification. The law gives me that right.

The CHAIRMAN. Are those men retained on the eligible list after their first rejection?

Doctor WHITE. The law provides they may be certified three times before they are dropped. After they are certified three times without appointment they are dropped from the eligible list. I think that is the general law.

Mr. SMYSER. Suppose your reasons are sufficient for yourself and not sufficient for the Civil Service Commission. Then what?

Doctor WHITE. Then they would insist upon my making an appointment from the certified list of eligibles. I should have to do it.

The CHAIRMAN. As far as the appointment of your assistant physicians is concerned, the general civil service laws govern as they do appointments in any other Department or any other institution under the Government?

Doctor WHITE. I think so; yes, sir.

Mr. SMYSER. Do you have any discretion, notwithstanding the Civil Service Board is not satisfied with your reasons? Must you take one of those?

Doctor WHITE. I think I must. That matter has never come up, but I don't think I would have any alternative. I think I should have to take one. If I could not satisfy them that my reasons were sufficient for rejecting them, I think I should have to take one.

The CHAIRMAN. Have you ever had occasion to reject all three of those certified to you?

Doctor WHITE. No, sir.

The CHAIRMAN. So all the appointments that have been made since you have been superintendent have been made from the three names that were sent to you by the Civil Service Board?

Doctor WHITE. Yes, sir.

The CHAIRMAN. Have these appointments you have made been satisfactory to you?

Doctor WHITE. Yes, sir; I think I have been very fortunate in all of my appointments on the medical staff? I have a very good lot of young men.

The CHAIRMAN. How many members are there on the medical staff altogether? I do not mean only your appointments. I will come to that in a moment.

Doctor WHITE. I think there are ten besides myself now; but we are short.

The CHAIRMAN. How many is your full quota?

Doctor WHITE. We ought to have four or five more—at least three more, and probably four or five.

The CHAIRMAN. Have you, under the authority vested in you as superintendent, power to appoint as many as you wish?

Doctor WHITE. There is no restriction, sir.

The CHAIRMAN. In regard to the medical staff?

Doctor WHITE. No; my appropriation is given to me in a lump sum, and I can spend it, with the supervision of the Department, as I see fit, either for salaries, for medical officers, or for anything else, with the approval of the Department, of course.

The CHAIRMAN. You say the appropriation for the government of St. Elizabeth's is given to you in a lump sum?

Doctor WHITE. In a lump sum; yes, sir.

The CHAIRMAN. And you can expend it entirely in your own discretion?

Doctor WHITE. Yes, sir.

The CHAIRMAN. How many of the medical staff have you appointed yourself? Mr. Hay wants this question put on the record. You think you should have 15 besides yourself?

Doctor WHITE. Approximately that. I need at least three more. Since I have been there I have endeavored to advance the medical work as fast as I could, and the more work we require of the staff, of course the more men we will need. The necessity for medical men has been gradually increasing. I say three now. Probably in another year we will need two or three more to do the work properly.

The CHAIRMAN. Is the medical staff the same size now as it was when you first went to the institution?

Doctor WHITE. It is, approximately. I don't remember exactly the number when I went there, but there is not a difference of over one or two, if there is that.

The CHAIRMAN. How many appointments on the medical staff have been made since you have been superintendent?

Doctor WHITE. Five or six. Some men have come and gone.

The CHAIRMAN. How many are there on the medical staff now that you have appointed?

Doctor WHITE. I think there are three only, although I have promoted some who are there besides those three.

The CHAIRMAN. Is there any examination held at the time these promotions are made?

Doctor WHITE. No, sir; that is not required. That is within my discretion.

The CHAIRMAN. Can you give me now the salaries of your medical staff, beginning with yourself, if you please?

Doctor WHITE. Yes, sir. My salary is fixed by statute at \$4,000. None of the other salaries are fixed by statute. I have inaugurated a system of salaries there which I think is identical with the New York State system. The first assistant physician gets from \$2,000 to \$2,500 increasing \$100 a year for each year of continuous service. The second assistant physician gets from \$1,500 to \$2,000; assistant physicians from \$1,200 to \$1,500; junior assistant physicians, from \$900 to \$1,200; medical internes, \$600, and for the position of clinical director, which I created, I fixed the salary at \$2,000.

The CHAIRMAN. Do you know the total amount you are paying now for the medical staff?

Doctor WHITE. I can not state from my recollection. For instance, the first assistant physician is now getting his maximum of \$2,500. The clinical director of course is getting \$2,000. There is no second assistant physician just at present. Doctor Logie, who is an assistant physician, is getting the maximum of \$1,500. Doctor Hunmer is not getting his maximum, but I am not sure what he gets. He gets \$1,300 or \$1,400. Doctor Schwimm, I think, is getting \$1,300, and then I have two junior assistants who are getting, one, I think, \$1,000 and one \$900, recent promotions, and one interne at \$600.

The CHAIRMAN. You spoke of some physicians receiving an annual increase of \$100. That means of course until they reach the maximum?

Doctor WHITE. Until they reach the maximum; yes, sir.

The CHAIRMAN. Your salary of course being fixed by statute, there is no increase?

Doctor WHITE. There is no increase.

The CHAIRMAN. Your clinical assistant gets \$2,000. What is the maximum on that?

Doctor WHITE. I have just made it flat \$2,000.

The CHAIRMAN. The first assistant, you say, has reached his maximum, \$2,500?

Doctor WHITE. Yes, sir. He has been there nearly twenty-five years.

The CHAIRMAN. Yes; twenty-nine years, I think he testified.

Doctor WHITE. I think so.

The CHAIRMAN. What is the maximum for the rest of the medical staff? What is the maximum for an assistant physician, for instance?

Doctor WHITE. Fifteen hundred dollars for an assistant physician and \$1,200 for junior assistant physicians. The assistant physicians are the men who have charge of the different medical services. There are five medical services, and the men in charge of those services are designated as assistant physicians, at a salary from \$1,200 to \$1,500. Of course, all these salaries are exclusive of maintenance, which the physicians get also.

The CHAIRMAN. I was coming to the maintenance. You live in the Asylum, do you not, Doctor?

Doctor WHITE. Yes, sir.

The CHAIRMAN. Do you live in one of the buildings, or have you a separate house?

Doctor WHITE. I live in one of the buildings—in the main building.

The CHAIRMAN. How many rooms have you in your apartments?

Doctor WHITE. Eight or ten, I guess. I couldn't tell you exactly. I never use them. I don't know how many there are.

Mr. HAY. That is where all the superintendents heretofore have lived?

Doctor WHITE. They always have lived there; yes, sir.

The CHAIRMAN. Doctor, have you a family?

Doctor WHITE. No, sir.

Mr. SMYSER. Are you not married?

Doctor WHITE. No, sir.

The CHAIRMAN. Now, come to the first assistant. Where does he live? Has he separate quarters of his own in one of the buildings?

Doctor WHITE. At the time that the new Administration Building was constructed the second floor of it was constructed to accommodate the physicians, and the assistant physicians live there in the apartments on the second floor of the Administration Building. The first assistant physician has apartments there.

The CHAIRMAN. Is the first assistant physician married?

Doctor WHITE. No, sir.

The CHAIRMAN. Are any of the staff married?

Doctor WHITE. Yes, sir; Doctor Clark, Doctor Blackburn, Doctor Logie, Doctor Hummer, and Doctor Schwinn are married.

The CHAIRMAN. Do their families live there?

Doctor WHITE. All of them except Doctor Schwinn. He is now living outside of the hospital. He was night medical officer before I gave him his appointment in charge of one of the services, and had

contracted for an apartment for a period of time, which, I think, has still several months to run. He is entitled to maintenance at the hospital, but at present his family is living outside.

The CHAIRMAN. All of the medical staff are entitled to maintenance in the hospital?

Doctor WHITE. Yes, sir.

The CHAIRMAN. And their families are entitled to maintenance in the hospital?

Doctor WHITE. Yes, sir. There is no law on that subject at all. It is a matter largely of custom. I have never permitted a medical interne, for instance, to bring his family to the hospital; only men who are regularly on the staff. The position of medical interne is a temporary appointment, which the superintendent has authority to terminate at the end of the year, so that it is not considered essentially a permanent position; but the men who are supposed to give their entire time to the institution are entitled, or it has been conceded they are entitled, to the maintenance of themselves and their families.

Mr. SMYSER. Who concedes it?

Doctor WHITE. It has always been done. It has always been the custom.

Mr. SMYSER. Suppose it has. How did it have its origin?

Doctor WHITE. I don't know.

The CHAIRMAN. Is that the custom all over the country?

Doctor WHITE. Yes, sir.

Mr. SMYSER. Did you ever take it up with the Secretary of the Interior?

Doctor WHITE. Yes, sir. When I first went there the Secretary asked me for a report of every employee of the institution in any capacity whose family was receiving support at the institution. I gave him such a report, and he and I went over the thing personally, and we asked one or two people—one is all I remember, one man who had his wife there, who formerly was employed in the institution and who had ceased to be employed—to have his family leave the institution, and that was done.

Mr. HAY. Was that because she was *persona non grata*?

Doctor WHITE. No, sir; it was because we did not consider she was entitled to support there; that this man's position was not such as to entitle his family to support in the institution.

The CHAIRMAN. But you say generally throughout the country it is the custom of the permanent medical staff to have accommodation and maintenance and support for their families.

Doctor WHITE. I think it is; yes, sir.

Mr. HAY. Notwithstanding the size of the family, Doctor?

Doctor WHITE. I should say so; yes. I don't know how that could be limited.

Mr. HAY. I do not, either. What I want to get at is whether the Government should support a man with a very large family. He might have seven or eight children.

Doctor WHITE. Yes; of course he may.

Mr. HAY. Moreover, would not that be doing an injustice to men on the staff who had no family?

Doctor WHITE. That is a personal matter; I don't know.

Mr. HAY. A man who has a large family is getting more salary?

Doctor WHITE. Absolutely. There is no question about that.

Mr. HAY. Could you give us an idea as to how much it costs the institution, or, rather, costs the Government, to maintain a man there with his family, say, a man with a family of three exclusive of himself?

Doctor WHITE. I could only guess at it, sir. I presume it costs the Government perhaps \$50 a month. It would cost a man three or four times that to maintain his family outside, but it would cost, I should say, at least that.

Mr. HAY. Taking into consideration his board and the use and occupation of whatever part of the building he was in?

Doctor WHITE. Yes, sir. Of course, the apartments were constructed for that purpose. They are not very well fitted for anything else, so that it is largely a question of board.

Mr. HAY. So that a man receiving a flat salary of, say, \$2,000 a year with a family, is really getting about \$2,600?

Doctor WHITE. He is getting at least as much as that, I should say. If it were calculated on what it would cost him outside he is getting a great deal more than that; but I don't know whether that is a fair calculation or not.

Mr. HAY. If he had to live outside——

Doctor WHITE. Of course, it does not cost the Government what it would cost him to live outside, but the reason for that is that the men are wanted there on the place.

Mr. HAY. They must be there all the time?

Doctor WHITE. Their duties are there throughout the twenty-four hours, and if they live outside then there is a constant difficulty about their not being there.

Mr. HAY. Is it a fact that in the various soldiers' homes throughout the country the persons in charge of the homes are supported by the Government? Or do you know about that?

Doctor WHITE. I don't know anything about them, Mr. Hay.

Mr. HAY. I think, as a matter of fact, they have their families there.

The CHAIRMAN. Doctor, how many members of the staff are there living in the Administration building now?

Doctor WHITE. Doctor Stack, Doctor Clark, Doctor Blackburn, Doctor Hummer, and Doctor Logie.

The CHAIRMAN. How many people are there altogether in that building?

Doctor WHITE. In that building?

The CHAIRMAN. Yes; I mean either the physicians or their families. How many people are there maintained by the Government? How much of a family has Doctor Clarke, for instance?

Doctor WHITE. Doctor Clark has his wife and one child. Doctor Blackburn has no children, just his wife. Doctor Hummer has his wife and two children. Doctor Logie has his wife and one child, and Doctor Stack has no family.

The CHAIRMAN. Doctor, in other instances that you know of, especially at Binghamton, where you were, is it not frequently the case that some members of the medical staff have separate houses?

Doctor WHITE. In a good many institutions they have what are known as staff houses, where the staff and their families live.

The CHAIRMAN. And the maintenance and support in those institutions that you know of are from the several States, are they not?

Doctor WHITE. Yes, sir.

The CHAIRMAN. In those cases?

Doctor WHITE. Yes, sir.

The CHAIRMAN. That is so in Binghamton, is it not?

Doctor WHITE. I don't know what the situation is now. When I was there the law permitted the superintendent, the first assistant physician, and the steward maintenance for himself and family, and other members of the staff had to pay a nominal fee for the support of their families. It was, I think, \$10 per month per capita. That, I think, was the custom then. I don't know whether that has been changed or not. I rather suspect it has, because I know at Binghamton almost all the staff are married, and almost all have their families there.

The CHAIRMAN. Is not that so at the State hospitals? For instance, Wards Island?

Doctor WHITE. Yes; they have a staff house at Wards Island; quite a large staff house.

Mr. HAY. While we are on the staff, Doctor, do you think it would be wise for Congress to appropriate each year so much for the first assistant, so much for the clinical director, and so on, just as they do for the employees of the various Executive Departments and for the employees of the soldiers' homes?

Doctor WHITE. I do not see any objection to that method of doing it. Of course it would make the service less elastic. For instance, given the number of attendants we have, if there was a special number designated of attendants——

Mr. HAY. I was speaking more especially of the staff.

Doctor WHITE. Even of the staff, if there were a special number designated, it might make it more difficult sometimes to get hold of a desirable man when he turned up. Desirable men do not always put in an appearance at the particular time we are preparing appropriation bills.

Mr. HAY. They would not appropriate for a man by name. They would appropriate for a first assistant physician, a clinical director, a second assistant, so many assistants, so many internes, and so many junior assistants.

Doctor WHITE. I understand. I am contemplating now the creation of one or two other positions, and it remains to find the people who are competent to fill those positions. For instance, I want a trained psychologist who is willing to devote his time to the study of the psychology of the insane.

I know hardly anybody in the United States who has any reputation in that line, but I have been looking over the field for a good while. If I should find such a person, the Civil Service Commission are usually pretty lenient, and if he was a specialist in his line and was practically the only one in the country they would permit me to appoint him directly. I don't know what I could get such a man for if I could find him; and if there were such restrictions when I found such a person, I would have some difficulty in appointing him, because he would probably be a man of ability, who would not want to wait six or eight or ten months for an appropriation bill to go through, and I would lose him perhaps. That is the only objection I would have to such a method.

The CHAIRMAN. Doctor, did you arrange these salaries when you came as superintendent?

Doctor WHITE. I have arranged them. That is my schedule.

The CHAIRMAN. How do they compare with the salaries given to similar officers in previous administrations?

Doctor WHITE. They are somewhat better.

Mr. HAY. If Congress provided for a psychologist at so much a year, you could employ one?

Doctor WHITE. Yes, if they did.

Mr. HAY. Would it not be a good idea for you to lay before the Committee on Appropriations, for instance, the reason why you wanted to employ such a man?

Doctor WHITE. Yes; of course I could do that. Of course all those conditions would be met. They would have to be, if there was such an arrangement as that, and if they had to be they would be.

Mr. HAY. I am just comparing that with the other branches and departments of the Government.

Doctor WHITE. Yes, sir.

Mr. HAY. That is always done, I believe.

The CHAIRMAN. In detailing this staff, you included Doctor O'Malley, did you not?

Doctor WHITE. She is classified as an assistant physician—that is, she is a woman assistant physician—but as far as her pay is concerned she is classified as an assistant physician, just in the same way, for instance, as the night medical officer. Although he is a night medical officer and that is his designation, for purposes of salary he comes in the classification of assistant physicians, you see.

The CHAIRMAN. What I meant is this: Is Doctor O'Malley included in the 10 assistant physicians?

Doctor WHITE. Yes, sir.

The CHAIRMAN. And Doctor Fitch also?

Doctor WHITE. No; I forgot him. I should have said one more.

The CHAIRMAN. Doctor Fitch is the night medical officer, is he not?

Doctor WHITE. He is the night medical officer.

The CHAIRMAN. What are his duties?

Doctor WHITE. He stays in the central part of the main building, and his duties are essentially to attend to any cases of sudden illness or any emergencies that may happen throughout the institution. For instance, if a patient is injured or makes an attempt at suicide, or something, the doctor does not have to be called and awakened and he does not have to dress. He is there with his little emergency kit and goes immediately to see about it. If some patient is disturbed and noisy, the nurse on the ward telephones the doctor and he goes over and sees about it. He is simply the itinerant medical officer of the night to attend to any medical duties that come up and also to have a general supervision over the coming in of employees who have been excused out, and see that, so far as they come under his observation, they come in at the right time and report in good condition.

The CHAIRMAN. They report to him?

Doctor WHITE. Yes.

The CHAIRMAN. Is that a new position in the hospital?

Doctor WHITE. No, sir; I don't know how long that has been in existence. There was such a position when I came.

The CHAIRMAN. You consider that an important position?

Doctor WHITE. I think it is a very excellent position in a big institution of that kind. For instance, they have a night medical officer at Manhattan, and have had for years and years, but instead of having a

regular physician the different members of the staff rotate in that duty, so that each man is on duty a month or two every year.

The CHAIRMAN. What time is he on duty? From what hour to what hour?

Doctor WHITE. Doctor Fitch?

The CHAIRMAN. Yes.

Doctor WHITE. He goes on at 9 o'clock, I believe, in the evening and goes off at 6 o'clock in the morning.

The CHAIRMAN. Now, Doctor, we will come to the nurses. Will you tell me what nurses you have there, how many of them, and how they are subdivided?

Doctor WHITE. There are approximately 300 employees in the immediate care of the insane.

The CHAIRMAN. How many men and how many women?

Doctor WHITE. I can't tell you from memory, but I think there are about 240 men to 60 women. I think that is approximately it.

The CHAIRMAN. Is that about the same proportion of the men to the women among the patients?

Doctor WHITE. Yes. There are a little over 600 patients, who are women, and pretty nearly 2,000 men. They enter the hospital as probationers. Under the civil-service law any employee in any capacity who comes to the institution—it is a general law, I think—may have his connection with the institution severed by the officer in charge at the end of six months without cause. If they stay beyond the period of six months then they can not be dismissed without some reason—that is, general unfitness for the duty is supposed to be the reason.

The CHAIRMAN. That reason is given by you in a letter to them if they desire it?

Doctor WHITE. Yes, sir; of course the reasons are given to the Civil Service Commission. We make a monthly report to them, with all the changes in the employees outlined, and all the differences in the salary, the reasons for severance from the service, etc. They come as probationers and serve six months. At the end of six months they become attendants, and receive pay according to a graduated schedule, which runs from a minimum to a maximum, the maximum being reached in every instance at the end of two years' continuous service. This is all my arrangement, too. I did that in the belief that a person's duties increased in value to the institution probably, in general, taking all cases as they come up, about two years, and after that, if they were not promoted, there was not sufficient reason for increasing their salaries. Then if during that time they enter the training school they can take a course there of two years, and at the end of two years, if they graduate, they become nurses. Then they enter upon the minimum wage grade of a nurse, which reaches its maximum at the end of two years. Besides the attendants and nurses there are charge attendants and nurses—that is, people in charge of wards, who are attendants or nurses, as the case may be, of course it being desirable to have nurses in charge of wards where there are sick people or people needing medical care. Then the next grade above charge attendant or charge nurse is assistant supervisor. Then comes the chief supervisor. Then in a grade rather by itself are the chief nurses, who have general supervision over the nurses' work in several wards.

It is the scheme, also, that in promotions among the attendants, generally, the preference shall be given to those who have

completed a course of training. In other words, we not only offer the attendants a course of training, but we consider when they take it that they have shown a commendable interest in their work, and have also fitted themselves for doing their work better by having the training, and therefore are entitled to preference in matters of promotion.

The CHAIRMAN. What is the maximum and minimum in each case you have mentioned?

Doctor WHITE. I will have to look up my pay roll. I think this pay roll is in evidence, but I am not sure. The male probationers begin at \$18, the female at \$14.

Attendants, male, from \$20 to \$30; female, \$15 to \$25. There is just \$5 difference, you see.

Charge attendants, male, \$25 to \$35; female, \$20 to \$30.

Nurses, male, \$25 to \$35; female, \$20 to \$30.

Chief nurses, male, \$30 to \$40; female, \$25 to \$35.

Assistant supervisors, male, \$35 to \$50; female, \$30 to \$45.

Supervisors, male, \$40 to \$60; female, \$35 to \$55.

Mr. SMYER. Why do you discriminate against the women?

Doctor WHITE. Well, that is usual in all institutions, and I presume it arose in this way. Men can do a very great many things that women can not do. They can be transferred here and there to all sorts of duties that women can not be transferred to. For instance, if it is necessary to take a gang of patients out working, and the man who usually takes them out is sick or away, a man can do that and a woman can not. So there are a number of duties of that sort which a man can do and a woman can not do. I presume that is the way in which the distinction arose. The chief nurses, although there is a grade given here for men, are all women. There are no chief nurses who are men.

The CHAIRMAN. Do the 300 you have mentioned include the chief nurses and the others running right down the list to the probationers?

Doctor WHITE. Yes, sir; I think there are only two chief nurses. It includes all of them. It also includes a few domestics, who do dining-room work and things of that sort, work which in most institutions I think is done by attendants, so that it is taking work from the attendants and work which the attendants would ordinarily do, and they are included. There are not many of them.

The CHAIRMAN. You say there are two chief nurses?

Doctor WHITE. Yes, sir.

The CHAIRMAN. What is the next grade of nurses?

Doctor WHITE. There is the charge nurse, the nurse in charge of a ward, and then the chief nurse, who has rather supervision over the nursing work throughout the department in which she is employed. There is one on the male and one on the female side of the house.

The CHAIRMAN. His duty is to keep constantly inspecting, to see that the people under him do their duty?

Doctor WHITE. Looking after the work of the nurses who are in her department. Both of them are women. As a matter of fact, they confine their attention largely to the wards in which the recent admissions are patients who require more or less continuous care and active treatment.

The CHAIRMAN. How are these nurses appointed? Do they go through a civil-service examination?

Doctor WHITE. They come in originally as probationers, you see.

The CHAIRMAN. Without any examination?

Doctor WHITE. Without anything except the filling out of that application blank which you have seen. Then the promotions from them up are dependent upon our own administration over there. We conduct the training school. Members of the staff conduct the lectures and recitations and conduct an examination.

I have instituted an examination for entrance to the training school, too, which was not in operation when I went there, because I thought the people who were going to be nurses and who perhaps are going outside of the institution and will be in a sense representative of the institution, ought to be at least able to read and write and spell ordinary words, etc. So it is in the simple English branches, such as reading and spelling and writing. We have an entrance examination to the training school.

The CHAIRMAN. That is conducted by you in the hospital?

Doctor WHITE. Yes, sir.

The CHAIRMAN. That is not conducted by the general civil-service board?

Doctor WHITE. No, sir.

Mr. HAY. What do these attendants cost a year? Do you know, Doctor?

Doctor WHITE. The cost of the per capita ward service is about \$40 a year, I believe.

Mr. HAY. That would be \$12,000?

Doctor WHITE. I think that is about it.

Mr. HAY. What do you estimate it costs to maintain these people?

Doctor WHITE. The nurses?

Mr. HAY. Yes, and the attendants, all of them.

Doctor WHITE. I think about \$10 a month is a fair approximation.

Mr. HAY. Ten dollars a head a month?

Doctor WHITE. About that. That is the way they figure it in New York—\$10 a month—and it was put upon this basis, \$2.50 for each meal and \$2.50 for lodging. I think it is a fair figure.

The CHAIRMAN. All of these nurses live in the asylum grounds?

Doctor WHITE. Not all of them. Most of them do. From time to time permission is granted some of them to live outside where that permission does not interfere with the management of the institution. Our idea is to have the majority of them live there, so that they will be available in case of any extraordinary emergency. For instance, once in a while the main fuse will blow. That lights a great number of wards. Under circumstances of that sort it becomes immediately necessary to get hold of every nurse who has duty on those wards and who knows the individual patients, and put them right on the ward with candles, etc., and keep them on duty until the fuse has been replaced. There are other things of that sort. We require occasionally, you see, to have nurses, and when we want them we want them pretty badly, so it is necessary to have a majority of them live there.

The CHAIRMAN. Do these nurses who live outside get any additional compensation?

Doctor WHITE. No, sir; that never has been the custom to do that.

Mr. HAY. Do any of these 300 attendants have their families there?

Doctor WHITE. No, sir; some of them are married and have quarters, but in that instance both of them are employed in the hospital. None of them have any children or any relatives there.

The CHAIRMAN. This 300 includes practically all the people who come in contact with the patients?

Doctor WHITE. Who have direct care of the patients; yes, sir—ward service, as we would call it.

The CHAIRMAN. Some people have been spoken of here in the testimony as domestics. Does that include the domestics?

Doctor WHITE. It includes them. There are not very many of them.

Mr. HAY. Twelve, I think they said.

Doctor WHITE. I judge perhaps that is a fair number. They do dining-room work and some general housework. There used to be quite a good many more domestics, I think, when I went there, but they were employing a lot of people of pretty low grade, at low salaries, and I did away with a good many of them because I did not think it was altogether safe to have that character of persons employed upon a ward, because there is a sort of irresponsible lot going around, perhaps leaving doors open and places unlocked, and all sorts of things; so that I have tried to get a better class of domestics, choosing them with this in view, so that they might be promoted to the attendant class.

The CHAIRMAN. Now come to the additional employees of the hospital?

Doctor WHITE. There are about 400 additional, about 700 employees altogether. Of course, the number varies from time to time. That includes the engineering department, the carpenters and builders, and so on.

The CHAIRMAN. How many different departments are there?

Doctor WHITE. I think perhaps I might read these over to you.

The CHAIRMAN. Will you look that question up and be ready to go on with it at 2 o'clock this afternoon?

Doctor WHITE. Yes, sir.

The CHAIRMAN. And also the duties of the several superintendents and the compensation for them.

Doctor WHITE. Yes; I have it right here, the whole thing.

The CHAIRMAN. Then we will take a recess until 2 o'clock.

The committee (at 12 o'clock, meridian) took a recess until 2 o'clock p. m.

AFTER RECESS.

The committee reassembled at the expiration of the recess.

Dr. WILLIAM A. WHITE resumed the stand for further examination and testified as follows:

The CHAIRMAN. Doctor, when we took our recess we were talking in regard to the several departments, I think.

Doctor WHITE. Yes, sir; I told you I would read you a list of them.

The CHAIRMAN. I would like to have you do that.

Doctor WHITE. The first is superintendent and medical staff. Then comes the office force, the administrative department, stenographers, clerks, typewriters, record clerk, etc.

Mr. HAY. What does that cost?

Doctor WHITE. I have not got all those separately figured out.

The CHAIRMAN. The first you mention is superintendent of medical staff.

Doctor WHITE. Yes; then next comes the administrative department.

The CHAIRMAN. I will go right ahead with the superintendent of medical staff, I believe, first. What are his duties?

Doctor WHITE. It is superintendent and medical staff—that is, myself and the medical staff.

The CHAIRMAN. I thought you said superintendent of medical staff. I beg your pardon; I did not understand you.

Doctor WHITE. Then comes the office force.

The CHAIRMAN. How many are there in that?

Doctor WHITE. Chief clerk, time and pay clerk, copyist and pay clerk, bill clerk, file clerk, record clerk, secretary to superintendent, stenographers and typewriters, pension clerk, clerk-typewriter, civil service clerk, and purchasing agent.

Mr. HAY. How many stenographers and typewriters are there?

Doctor WHITE. There is the secretary to the superintendent, one; then there are two other stenographers and typewriters, and there are two or three other clerks who use the typewriter but who are not stenographers.

The CHAIRMAN. Who is the chief clerk?

Doctor WHITE. Miss Alice Hardy.

The CHAIRMAN. What is her salary?

Doctor WHITE. \$1,500.

The CHAIRMAN. How is she appointed?

Doctor WHITE. She was appointed before I went there; I do not know. I can not tell you from personal knowledge.

The CHAIRMAN. She has been employed in the hospital since before you went there?

Doctor WHITE. Yes. She is designated as chief clerk. As a matter of fact her duties more properly come under the title of financial clerk.

The CHAIRMAN. What are her duties?

Doctor WHITE. She with one or two assistants keeps track of all the finances of the hospital. She keeps track of all appropriations, and under her is the time clerk, who makes up the pay rolls, and another bookkeeper, who takes care of all ledger accounts.

The CHAIRMAN. Who fixes her salary?

Doctor WHITE. I fix all the salaries.

The CHAIRMAN. Has her salary been increased since you went there?

Doctor WHITE. Yes; her salary was \$1,200 when I went there, and it has been made \$1,500.

The CHAIRMAN. She has been there for how many years?

Doctor WHITE. She has been there for a number of years. She was an assistant in the department for several years. I can not tell you how long, but she has been there a good many years in one capacity or another.

The CHAIRMAN. Do you know what part of the United States she comes from?

Doctor WHITE. She and her sister, who both work in that office, live in Anacostia, and have for a number of years.

The CHAIRMAN. And they lived there when you went to the hospital?

Doctor WHITE. Yes, sir.

The CHAIRMAN. What are her hours of work?

Doctor WHITE. The hours of the entire clerical force there are from 9 o'clock in the morning until half past 4 in the afternoon, the same as in all the Departments; but for extra duties I may call upon them to do additional duties, and she is very frequently there until after half past 4.

The CHAIRMAN. Without any additional compensation?

Doctor WHITE. Without any additional compensation.

The CHAIRMAN. And she lives outside of the grounds?

Doctor WHITE. Yes, sir. Some of the clerks live inside.

The CHAIRMAN. That is so with the entire clerical force?

Doctor WHITE. Some of them live in the hospital, but that is so as regards the hours, for the entire clerical force. Some live inside and some live outside.

The CHAIRMAN. With reference to those who live inside the hospital, are they maintained by the—

Doctor WHITE. They are maintained; yes, sir. We are able to get them at a considerably less salary on that account.

The CHAIRMAN. How many employees are there directly under this officer?

Doctor WHITE. The financial clerk?

The CHAIRMAN. Yes.

Doctor WHITE. She has a bookkeeper and a time clerk. They are immediately in her office.

The CHAIRMAN. What are they paid?

Doctor WHITE. Sixty-five dollars a month, both of them.

The CHAIRMAN. What are their duties, particularly?

Mr. HAY. Do they stay in the building?

Doctor WHITE. Neither of them do. The bookkeeper simply keeps the books—the ledger, principally—with all the people we do business with, the firms that supply us with meats and clothing, and all that sort of thing. The time clerk has charge of the pay-roll, and keeps track of all the employees, their time off, etc., so that at the end of the month they can make up the pay roll, with disallowances for time off, without pay, and keeps track of vacations, and all that sort of thing.

The CHAIRMAN. So that both of them attend to the clerical work in the office.

Doctor WHITE. Yes. Before I forget it, Mr. Hay, in speaking about the per capita allowance for ward service, I want to make a correction. I told you it was \$40 per capita, and you said "That means \$12,000," and I guess I said "yes." Well, it does not. I did not quite sense your calculation.

When we speak of per capita in connection with the administration of the hospital we mean by per capita, so much per patient. So that when I say ward service costs \$40 per capita I mean it costs \$40 per annum for each patient, so that it makes pretty near \$100,000 instead of \$12,000. The next department is nurses, attendants, and supervisors. We went over that before.

The CHAIRMAN. Can you give the salary of the clerical assistants?

Dr. WHITE. Yes, sir. The chief clerk gets \$1,500 — \$125 a month. The time clerk gets \$65, the copyist and pay clerk gets, I see, \$60. I said \$65, but my memory evidently did not serve me.

The bill clerk gets \$50. The file clerk gets \$50. The record clerk gets 50. My private secretary gets \$65. The stenographers and typewriters get \$40. The pension clerk gets \$100 per month, and another clerk and typewriter gets \$65. The civil service clerk gets \$50. The purchasing agent gets \$125.

The CHAIRMAN. The first you mention is the bill clerk?

Dr. WHITE. Yes; he is our voucher.

The CHAIRMAN. Who is he?

Doctor WHITE. His name is Mr. Cross. His duties are to compare the vouchers with the bills. When we make a purchase in any way the bills come in to the purchasing agent. The goods are delivered to the storehouse, and when the goods come into the storehouse the storekeeper makes an inventory of the goods and sends it to the purchasing agent. He compares the inventory with the bill rendered, and if they agree he OK's the bill and the bill goes to the bill clerk, and the bill clerk makes out the vouchers. They are made out in duplicate, one being made out in the financial office, and he making one out. He compares them with the bills and compares the price with the annual contract prices.

The CHAIRMAN. Does he have anything to do with these things that are bought in open market?

Doctor WHITE. Absolutely nothing. His is purely a clerical position.

The CHAIRMAN. Now, the file clerk. Just take them as you mentioned them there and tell us what their duties are.

Doctor WHITE. I have given the time and pay clerk and the bill clerk. The file clerk has charge of the record room. In the record room is kept all of the correspondence of the hospital and all the clinical records of the patients. We have there all letters and all records and the card indexes to all those records. Every letter that is written in the hospital, after it is initialed by the person who dictates it, comes to me for signature. After it is signed it goes with an addressed envelope, which the person who writes the letter makes out, to the record room. There it is copied, and the copy is filed with the letter to which it is an answer, and the letter is mailed from the record room.

All of the clinical records are included in the record room. If anybody wants to get a clinical record of any patient, he makes out a requisition upon the record clerk, who gives the record out and keeps a note of the patient's record, the name of the patient, and to whom the record goes, and the date. If at any time anybody wants a record and it is not there, the record clerk can locate it. That is, in the main, her duty. She has an assistant there. It takes two to handle that room.

The CHAIRMAN. What is the next?

Doctor WHITE. The next is the secretary to the superintendent. She is a stenographer and typewriter and does all my clerical work. Of course I have considerable correspondence, and when I want to hunt up contracts and correspondence, and all that sort of thing, I hand it directly over to her.

The CHAIRMAN. What is the next?

Doctor WHITE. The next are the stenographers and typewriters, who are at the service of the medical staff for any purpose for which they may want them. The majority of their work consists in answer-

ing letters, most of which are letters from the friends and relatives of patients, inquiring about them, and in taking dictations for the case records, and filing them with the records of the patients.

The CHAIRMAN. What was the next you mentioned?

Doctor WHITE. The pension clerk.

The CHAIRMAN. Yes. I would like to know particularly what the pension clerk does?

Doctor WHITE. We have at the hospital approximately 400 pensioners, and the pensions of all those pensioners under the law are paid to the superintendent, and he keeps track of all the pension vouchers, and does all the correspondence relative to the matter of pensions. There is also a considerable amount of money which is not pension money, for which the superintendent is agent. For instance, in the past few months we have been trying to locate people who are the heirs under the law to money that has been left there by deceased patients, and he conducts all the correspondence with reference to that matter. Then he makes the reports daily, monthly, or as the case may be, to the different departments. He keeps track of the admissions and discharges of patients from the different departments. He makes a daily report, for instance, to the District Commissioners of all discharges, deaths, and absences from the hospital on parole of District patients. We make, I think, monthly reports to the Marine-Hospital Service. We make reports to the War Department and to the Navy Department. Reports have to be made as to the competency of certain patients to draw their pay, who are in the different departments, as to the fact that certain patients in those departments are still living, and all those general reports to the different departments, and all of the matters touching pensions he looks after.

The CHAIRMAN. Matters touching pensions. Of course that affects the patients in the hospital that you receive from soldiers' homes?

Doctor WHITE. Yes; any pensioner, no matter where he comes from.

The CHAIRMAN. I wish you would tell me how those pensions are treated. To whom are they paid?

Doctor WHITE. The act of February 20, 1905, provides that all pensions of pensioners who are patients in the hospital shall be paid to the superintendent of the hospital and disbursed by him under the rules and regulations made and approved by the Secretary of the Interior. It also provides that a certain proportion of the money shall be set aside for the personal use of the patient, and that after that his dependent relatives, the wife, dependent parents, and minor children, in the order mentioned, shall receive a certain proportion of the pension, and finally that if there is any left the hospital will be reimbursed for the maintenance of the pensioner. And that is all provided for by a very careful set of rules which I think I have here and which I will put in evidence. Here is the act of February 20, 1905, and the rules and regulations of the Department under which the money is paid out.

(The above-mentioned act of February 20, 1905, and regulations for the disbursement of pension money paid to the superintendent of the Government Hospital for the Insane, under the act approved February 20, 1905, are filed herewith, marked, respectively, "Exhibit White No. 1" and "Exhibit White No. 2.") (See pages 1743, 1744.)

The CHAIRMAN. Before I read this will you answer me first, who determines the amount of money that is to be used for the personal benefit of these pensioners?

Doctor WHITE. It is determined by the Department. One-sixth of all the pension money paid to the hospital is set aside for the personal use of the patient.

The CHAIRMAN. What do you mean by "personal use?"

Doctor WHITE. By personal use I mean for anything which may be needed for the pensioner's benefit, for any purpose for the pensioner which is not provided in the regular support of the hospital; for instance, if the pensioner should need anything special which would not be a proper expenditure——

Mr. SMYSER. Illustrate one.

Doctor WHITE. For instance, if the pensioner is sick, and it is desirable to especially provide him with fruit or something of the sort; or if he desires it and wishes to spend it for tobacco, or clothing, or a watch or something of that sort; if his mental condition will permit it, it may be used under the discretion of the superintendent for that purpose.

The CHAIRMAN. The disbursement of that one-sixth is entirely within the discretion of the superintendent?

Doctor WHITE. It is within the discretion of the superintendent, but can only be used directly for the pensioner and for his benefit. I may be able to give you further information upon that subject.

The act of August 7, 1882, provided that all pension money of pensioners, patients in the hospital, should be covered in toto into the support fund of the hospital. The Secretary of the Interior for a number of years, three or four years, urged Congress to change that act. There is a report of that act in this report of the Secretary for 1903. The trouble with that act was this, that a pensioner, if he got \$6 a month or if he got \$75 a month was exactly upon the same basis, that the whole amount of money was covered into the support fund of the hospital, and that he got absolutely no benefit from it.

The CHAIRMAN. So that the man who got the smaller pension paid \$6 and the man who got the big pension paid \$75?

Doctor WHITE. The man who got \$6 paid \$6 and the man who got \$75 paid \$75. I went before the Pensions Committee of the House at the request of the Secretary and placed the matter before them, and asked them to pass a law, and they passed the act of February 20, the principal argument of the Secretary being that the pensioner in every instance should have some personal benefit from his pension, and the act of February 20 was the outgrowth of that.

The CHAIRMAN. Is that one of the papers you have given me?

Doctor WHITE. Yes, sir. That is the act; and that large sheet contains the rules of the Department. If you turn over the first sheet you will see exactly the amount of money to be taken from the pensioner for every purpose.

The CHAIRMAN. The only portion of the pension money that you have any discretion about is this one-sixth for their personal benefit?

Doctor WHITE. That one-sixth; yes, sir.

Mr. HAY. Doctor, a good deal has been said about the appointment of guardians for these insane people.

Doctor WHITE. Yes, sir.

Mr. HAY. Are guardians, or whatever term you use——

Doctor WHITE. Guardian is the word that is used.

Mr. HAY. Are guardians ever appointed for these old soldiers?

Doctor WHITE. They were previous to the act of February 20; but since that act was passed it has done away with the necessity of any guardian being appointed for the purpose of drawing the pension money. There were guardians for old soldiers before that act was passed, but immediately it passed that ended the matter of guardians for the purpose of drawing pension money.

Mr. HAY. Suppose a soldier is discharged as cured, and you have in your hands a certain sum coming to him. How do you pay it over to him?

Doctor WHITE. I make a check out to him, and give it to him when he goes.

Mr. HAY. It is not necessary to appoint any guardian?

Doctor WHITE. No, sir; not if he is well. If he is unrecovered, it is necessary to have a guardian to make the payment.

The CHAIRMAN. What is the procedure that is used in the case of a soldier who has a pension, and who has near relatives who wish to take private charge of him, or to put him somewhere else? Suppose a man, for instance, has a pension of a considerable amount, the charge of which fund you have. Suppose there are relatives of his who desire to care for him outside of a hospital, privately. How they can accomplish their desire?

Doctor WHITE. Well, of course, a good many things are to be considered in general in connection with such cases. In the first place, the pension money can not be paid to anybody but a legally appointed guardian. If he was a patient in the hospital, and was not in any way discharged, he would have to have a guardian to have the pension money paid over to him. That would protect the patient pretty well.

The CHAIRMAN. There would have to be some court proceeding?

Doctor WHITE. There would have to be some proceeding of that sort in order to have the pension money paid to him. We are rather careful about discharging people under those circumstances. Of course, we, as well as everybody else who has to do with pensioners, are approached in all manner of ways by unprincipled people who have really no object in view except to secure control of the pensioner's pension, and so we are pretty careful about those things; but if we are satisfied that the interests of the patient are not going to suffer there is no earthly reason why the pensioner should not be discharged to any person or to any institution who can properly care for them. Sometimes we are not satisfied of that, and in that case it is our duty to resist discharging him.

The CHAIRMAN. I understand that very well. Do you ever require a bond of people or companies in cases of that character?

Doctor WHITE. Of course, a guardian in qualifying before a court has to give bond.

The CHAIRMAN. Do you ever discharge anybody from the asylum who is not cured without having a guardian appointed?

Doctor WHITE. Oh, yes, indeed; people who are unrecovered, but whose mental condition is such as not to constitute them a menace to themselves or anybody else and whom we believe we are discharging to persons who are interested in their welfare and who will give them proper care or supervision and see that they will not want for the

necessities of life. Under those circumstances we very often ask people to sign a form which we have prepared, the same form that is used in New York State, simply certifying that the person who signs it is taking this patient away, and is in a position to provide him with the necessities of life and will look after him. It amounts to that.

The CHAIRMAN. But of course you being the custodian, or the asylum being the custodian of the pensioner's fund, can not pay over any funds or turn over any other possession unless a guardian is appointed?

Doctor WHITE. Not if they are unrecovered; no, sir.

Mr. HAY. Do you ever have a guardian appointed in any case except when the patients are going to leave?

Doctor WHITE. Yes, sir. Oftentimes guardians are appointed for patients who have money coming to them from some source, more particularly patients who have been in the active service of the Army and Navy and who have back pay coming to them, and who would not be paid unless a guardian were appointed, and who perhaps in many instances have relatives at home who are more or less dependent upon them, and who are mentally competent to signify a desire to send money to their relatives, in which case the appointment of a guardian will enable them to do that.

Mr. HAY. That guardian is appointed by the court?

Doctor WHITE. That guardian is appointed by the court; yes, sir.

Mr. HAY. Does the court act upon your petition?

Doctor WHITE. Yes, sir; usually upon my petition.

Mr. HAY. As to who the guardian shall be?

Doctor WHITE. Yes, sir; in many instances.

Mr. HAY. Are the people who are interested in the funds that are to be paid over informed of that proceeding in any way?

Doctor WHITE. Usually they are. I do not know but that they always are. Of course, as a general thing, such persons, friends, and relatives live outside of the jurisdiction of the District of Columbia, and under those circumstances of course it is desirable to have a guardian within the jurisdiction, and I think I am not wrong when I state that the court is rather disinclined to appoint anybody outside of the jurisdiction.

Mr. HAY. If a patient's mind is such that he can reasonably consult with you as to who he wants for his guardian, do you——

Doctor WHITE. We never make any objection to any suggestion.

Mr. HAY. Do you yield to his wishes?

Doctor WHITE. I do not know that I recall any case where the patient's wishes have governed the situation, but there have been a number of cases where the wishes of relatives have. We never make any objection to anyone whom the relatives desire to have designated.

The CHAIRMAN. Doctor, when this petition is prepared is there a nomination of some particular person for guardian?

Doctor WHITE. In the petition?

The CHAIRMAN. Yes.

Doctor WHITE. Yes, sir; Mr. Fenning has usually been mentioned in the petition.

Mr. SMYSER. Why? Why is he usually mentioned?

Doctor WHITE. I will tell you, sir. Before I came to the hospital the question of the appointment of guardians was taken up by Doctor Richardson with the Interior Department, and was gone over at great

length, and subsequently when I came I took it up with the Interior Department, and the necessity for a guardian being evident in a considerable number of cases and the undesirability of having the superintendent act as guardian of course made it necessary——

The CHAIRMAN. Let me interrupt you right there. Had the superintendent often acted as guardian in other cases before you came there?

Doctor WHITE. I think Doctor Richardson objected very seriously to acting as guardian, and I should object, too. I would not want to do it. I not only would not want the additional work, but I do not think it would hardly be a proper function for me to assume. It was suggested then by the Department, and concurred in by Doctor Richardson then and by myself afterwards, that some responsible and proper legal man in the District might be generally designated to do that work. The reason for designating one man rather than designating a different person each time is this: There are a great many people who have very small amounts of money, and if a guardian was appointed who was very stringent in getting his portion of the money allowed him under the law the patient oftentimes would not have practically anything left. Mr. Fenning has acted in a number of cases, and in a considerable number of cases he has charged the minimum fees; and he has often done work for nothing.

He can afford to do that if he gets a considerable number of cases, but if a single case of that sort were given to a man who had not, perhaps, the advantage of having the pay from some other cases that amounted to something he maybe would not do it. Our experience before with the Washington Loan and Trust Company, for instance, who had acted as guardian in a good many cases, was that they got their pound of flesh, as it were, every time, irrespective of the welfare of the pensioner. They always extracted every cent the law allowed them, which worked a hardship in many cases upon the pensioner.

The CHAIRMAN. Did you know Mr. Fenning before you came here?

Doctor WHITE. No, sir.

The CHAIRMAN. Had he been appointed guardian in several cases?

Doctor WHITE. Before I came?

The CHAIRMAN. Yes.

Doctor WHITE. Yes, sir. He was acting in that capacity, as guardian, in a number of cases.

Mr. SMYER. So that his introduction to that business did not come from you?

Doctor WHITE. No, sir; it antedated my time.

Mr. SMYER. But on consultation with the Secretary of the Interior it was concluded that it would be better to have one man than to distribute these guardianships promiscuously around over the city.

Doctor WHITE. Yes, sir. I did not consult personally with the Secretary, but with the chief of the division under which the hospital comes.

Mr. SMYER. But he was the boss in that regard?

Doctor WHITE. Yes, sir.

The CHAIRMAN. As I undersand it, the District court judges may decline to appoint anybody if they wish to.

Doctor WHITE. Absolutely.

The CHAIRMAN. They have the entire say.

Doctor WHITE. Absolutely.

Mr. HAY. Who is the chief of the division you referred to?

Doctor WHITE. Mr. Acker. One other thing about that guardianship matter: Previous to the act of February 20 when guardians were appointed for old soldiers it was done with the full knowledge and consent of the Pension Bureau, particularly in the person of Mr. Davenport, the Assistant Commissioner of Pensions.

The CHAIRMAN. The Pension Office would always be notified in regard to a matter of that kind anyhow?

Doctor WHITE. They would have to be, in order to make payment to the guardian.

Mr. HAY. The fee of the guardian is fixed by law, is it not?

Doctor WHITE. I think so. At least, I have nothing to do with it in the hospital. I presume some legal proceeding fixes it, either by the court or by law.

Mr. HAY. You simply pay to the guardian whatever is in your hands belonging to the particular person for whom he is guardian?

Doctor WHITE. Yes, sir.

The CHAIRMAN. You say that when you came here you found Mr. Fenning had been frequently a guardian?

Doctor WHITE. Yes, sir.

The CHAIRMAN. And that your reason for continuing in your petitions to suggest Mr. Fenning was because you found that that was better for the pensioners that had small amounts of money?

Doctor WHITE. It was better in that particular; and then in all cases he discharged his duties in a highly efficient way, and in the way which was for the best interests of the patients. In the matter of the Washington Loan and Trust Company, for instance, they hold now thousands of dollars worth of money which was paid to them previous to the act of February 20, 1905, and except some special legislation is enacted there is no possible way of getting that money away from them, because they are under bond to care for it. No more money is being paid to them, and unless some special legislation is enacted that money will in many cases never be claimed, because the pensioners have no relatives to claim it, and it goes on as an asset of the Washington Loan and Trust Company.

The CHAIRMAN. When you say no money has ever been paid you other than this one-sixth of the pension that is for their personal benefit—

Doctor WHITE. I mean since the act of February 20, when all money has been paid to me. The Washington Loan and Trust Company have practically rested on their oars, with the money that had been paid to them previous to that. They have got that money, and there is no way of getting it, because they are under bond as guardians. There is no way for me to get it anyhow.

The CHAIRMAN. Is this trust company you speak of guardian for some of the people now in the institution?

Doctor WHITE. Yes, sir.

The CHAIRMAN. Do they pay over to you any portion of that money for the personal benefit of these people?

Doctor WHITE. No, sir. Occasionally we extract some money from them for some clothes, or something or other, but not very much. They used to, before the act of February 20, making all pensions payable to the superintendent, pay quite regularly for clothing and any incidental expenses that the hospital would certify; but they take the

position now that the money is paid to the superintendent, and we can do that. They have that money, and I do not know of any way of getting it unless some law gets it away from them.

The CHAIRMAN. How considerable a sum is there in their hands?

Doctor WHITE. At least several thousand dollars. I do not know how much.

The CHAIRMAN. What will become of that money when the several pensioners die?

Doctor WHITE. If they have not any legal heirs there is nothing to prevent the Washington Loan and Trust Company keeping it. They have had the use of it all these years.

The CHAIRMAN. Do you mean to say that the Washington Loan and Trust Company has money belonging to pensioners of our Government, and that no use whatever is made of that money for the particular benefit of either St. Elizabeth hospital or the pensioner?

Doctor WHITE. I think that is the situation, sir.

The CHAIRMAN. Are they still receiving pensions?

Doctor WHITE. No; they are not now.

The CHAIRMAN. They are not receiving payments now?

Doctor WHITE. No; not since the act of February 20.

The CHAIRMAN. The pensions are paid to you as superintendent?

Doctor WHITE. They are paid to me. It was paid to them previous to that act. If the pensioner is insane, or dies insane without any legal heirs, naturally the money stays there, as far as I can see. I do not see where it would go.

The CHAIRMAN. You mean by that that if anybody dies there somebody would have to take proceedings and have letters of administration taken out upon the estate to gather in that money?

Doctor WHITE. Yes, sir.

The CHAIRMAN. What would happen in the case of pensioners who die when the money is in your possession, as now? How does that get to the family of the deceased pensioner?

Doctor WHITE. The act of February 20 provides for that. If the patient dies, all the money that is remaining to his credit on the books is covered into the support fund of the hospital. There are only three classes of dependent relatives for whom it is the purpose of the pension laws to provide—that is, the wife, dependent parents, and minor children—and while the pension is payable to me, a certain portion of it, in accordance with those rules, is paid to any dependents of those three classes, and when the pensioner dies the money is covered into the support fund of the hospital.

The CHAIRMAN. That is, provided that particular pensioner does not have a wife, dependent parents, or children?

Doctor WHITE. Yes.

The CHAIRMAN. So, under the law as it now exists, a pensioner who dies in St. Elizabeth, who has neither children nor dependent parents, nor wife, has his pension money go to the Government hospital?

Doctor WHITE. Yes, sir. You see, it is not the purpose, as I understand it, of the pension act to create an estate for distribution to the relatives except those three classes of relatives, and therefore it reverts to the hospital which has had the care of the pensioners and is spent in support of the institution, and indirectly, of course, for the benefit of pensioners.

The CHAIRMAN. What is done with the money that reverts to the hospital in that way after the death of the pensioner?

Doctor WHITE. It is covered right into the general support fund, which is a lump appropriation used for the maintenance of the institution.

The CHAIRMAN. Does that mean that it adds——

Doctor WHITE. It adds to the appropriation.

The CHAIRMAN. Or does it go back to the general fund and be then paid back to you?

Doctor WHITE. No. Of course it can be deposited directly by my check as agent to my account as superintendent and I can draw on it, although none of it has ever been dealt with in that way, because this act was approved February 20, 1905, and the Secretary then appointed a board to draw up rules and regulations. That board consisted of myself and the chief of the finance division of the Pension Bureau. It took us nine months to get the regulations drawn up and it was a very great job, because many points of law had to be passed on by the Attorney-General or the Comptroller. It was a long tedious process, and now that we have them drawn up we find there are very many things yet to be passed upon. There are mooted points coming up all the while, and none of the money has ever been turned into the support of the hospital, because we do not want to begin to do that until we are certain we are right in the matter.

The CHAIRMAN. So there is a certain fund now that may be turned into the support of the hospital?

Doctor WHITE. Yes, sir.

The CHAIRMAN. How much does the fund amount to, do you know?

Doctor WHITE. About \$20,000, I think.

The CHAIRMAN. As far as the law now stands you have perfect authority, as superintendent of the hospital, to use that \$20,000 in addition to the appropriations that have been made by Congress for the fiscal year?

Doctor WHITE. Yes, sir.

Mr. HAY. Is there not a provision in the sundry civil bill——

Doctor WHITE. I have not seen that bill. I know what you refer to, but that does not refer to pension money, Mr. Hay; that refers to other moneys standing to the credit of patients other than pension money.

Mr. HAY. Doctor, I understand that under the act of February 20, 1905, you do not appoint any of these guardians for these soldiers?

Doctor WHITE. It is not necessary. You see the money is paid directly to the superintendent and paid out according to the rules of the Department.

Mr. HAY. Do I understand that before the act of February 20, 1905, it was necessary to appoint a guardian?

Doctor WHITE. It was.

Mr. HAY. For all soldiers who had anything——

Doctor WHITE. All soldiers who were not mentally competent to sign pension vouchers—many were competent and many of them did—but those who were not mentally competent could not draw pensions except by a legally appointed guardian.

Mr. HAY. And the pension, therefore, could not be paid in to you?

Doctor WHITE. It could not be paid at all.

Mr. HAY. Although they were inmates of the hospital?

Doctor WHITE. No, sir; it could not be paid at all. It could only be paid to the legally appointed guardian, if they were mentally incapacitated from signing the vouchers.

Mr. HAY. So that every man in the hospital before that time drawing a pension had to have a guardian appointed?

Doctor WHITE. No, sir; the Pension Bureau paid a great majority of those pensioners upon the signature of the pensioner upon a certificate by me that he was mentally competent to sign. In other words, the mere fact of legal insanity does not necessarily mean that he does not know enough to sign a pension voucher.

Mr. HAY. The point I am getting at is with reference to every man who is not certified by you to be mentally competent.

Doctor WHITE. He either had to have a guardian or he could not draw his pension.

Mr. HAY. Then the guardian, after deducting the expenses of the proceeding, paid over to you——

Doctor WHITE. No, sir; he did not pay to me at all. If the pension was sufficient, the guardian usually got incorporated in the order of the court appointing him an order to pay the hospital for the pensioner's maintenance. That is all. He did not pay money to me.

Mr. HAY. I do not mean paid to you personally, but I mean he paid to you——

Doctor WHITE. Only in that way, for the maintenance of the pensioner.

Mr. HAY. I have here in my hand, which has just been handed to me by the clerk of the committee, an abstract in a case which was determined here in the supreme court of the District of Columbia, I believe. I see at the end of it the report of the guardian in this case, in which he says: "There being no further need for the services of the committee in this case, it is suggested that after deducting," etc., "the committee be authorized to pay the remainder to the Superintendent of the Government Hospital for the personal use of the ward and for his burial expenses should he die while a patient of that institution, and that upon the filing of the superintendent's receipt in this case this committee be discharged."

Doctor WHITE. That was in the matter of the discharge of the guardian where the amount of money was small.

Mr. HAY. Then he did pay to you as superintendent?

Doctor WHITE. He did evidently in that case.

Mr. HAY. Was not this the usual proceeding?

Doctor WHITE. I guess it was, in some cases where the amount of the pension was small. That evidently was entered after the act of February 20 was passed, the guardian having drawn a certain pension money previous to the act.

Mr. HAY. These proceedings were instituted February 13, 1905.

Mr. SMYSER. When was the action taken?

Mr. HAY. It does not disclose—January 22, 1906.

Doctor WHITE. There was no more money coming to the guardian, and he had a small balance and turned it over to the hospital for the personal use of the ward.

Mr. HAY. This is his report, the guardian's report, in the case, filed January 22, 1906, and this order was entered the 23d day of January, 1906. So that he was appointed guardian on February 13, 1905, and he filed his final report in January, 1906.

Doctor WHITE. He never drew a pension, probably, or more than one quarter.

Mr. HAY. I see in this report of the guardian that he paid to the coroner here a fee of \$10.

Doctor WHITE. Paid to the coroner?

Mr. HAY. Yes, sir; not in his capacity, I presume, as coroner, but as a physician and witness before the court.

Doctor WHITE. Yes, sir.

Mr. HAY. And that he paid to Doctor Toner a fee of \$10.

Doctor WHITE. Yes, sir.

Mr. HAY. And the whole of the estate going into the hands of the guardian was \$226 and some cents. Is it required under the law that two physicians shall give evidence before the court?

Doctor WHITE. I think so.

Mr. HAY. Or is that in the discretion of the court?

Doctor WHITE. I don't know. I am not sure, but I think it is required. Two witnesses usually do appear, at any rate. That is the usual number.

Mr. HAY. Then he charges a counsel fee of \$25, which he paid, it appears by a receipt filed in the papers, to a Mr. Coldren. Then he charged a commission of \$22.61, which would make in fees, outside of clerk's fees, \$67, the estate amounting to \$226. Do you think that is reasonable—that is, where a gentleman does all the business of this character? Those are all ex parte proceedings. I don't know what the practice is here in the District—

Doctor WHITE. I do not know the case.

Mr. HAY. It is the case of Philip Thomas.

Doctor WHITE. I do not know him.

Mr. HAY. He was a private soldier—that is all.

Doctor WHITE. I presume his pension continued beyond that, and was paid to the superintendent. I don't know.

Mr. HAY. Do you not think if there is a gentleman selected for the purpose of doing this work by the hospital that the fee ought to be fixed by the court?

Doctor WHITE. He can not draw that fee except it is ordered by the court. The court allowed the fee.

Mr. HAY. For instance, Congress has fixed the fee in all pension cases, and a man can only get a fee of \$25 in any pension case, I do not care if he gets \$1,000 for a man, or \$5,000, or a pension of \$6 a month.

Doctor WHITE. I see no objection to the court fixing the fee.

Mr. HAY. Would it not be fairer to these old soldiers?

Doctor WHITE. I do not know but that it might be.

Mr. HAY. I do not mean to say that the fee is exorbitant, but it seems a hardship on the old soldiers who have not anything else but that. Do you not think the fee of one physician would be enough in a case of that kind, where there is no dispute about the fact of the man's insanity?

Doctor WHITE. I think it usually would be ample, but whether or not the law requires two I do not know. I presumed it did.

The CHAIRMAN. As a matter of absolute fact, all these expenses charged up against this particular estate in the case of Philip Thomas are matters that are absolutely outside of your jurisdiction?

Doctor WHITE. Absolutely. I have nothing to do with it at all. That is all ordered or allowed by the court, and perhaps it may be passed upon by the auditor for the District. I do not know.

Mr. HAY. No; it is allowed by the court. The court passes on the report of the guardian, and unless somebody files some objection to the guardian's report he agrees to it, as a matter of course.

The CHAIRMAN. When you were speaking of money being paid directly to you, was there not some money paid to you under the act of 1882, where pensioners had been inhabitants of soldiers' homes?

Doctor WHITE. There was a considerable amount of money paid to me under the act of August 7, 1882, which provided that the entire pension money, accrued or otherwise, should be covered into the support fund of the hospital, provided the pensioner had none of the dependents as specified.

The CHAIRMAN. I did not think you had mentioned it, and it was called to my attention.

Doctor WHITE. Yes, sir; considerable. Most of it went back to the Treasury. The largest sum was paid to me a few days before the close of the fiscal year. The Pension Department happened to find themselves with a large balance, and asked me to write them a letter asking for the money. I did so, and they paid it to me; and it went right back into the Treasury.

Mr. HAY. In cases of arrears of pay, which is the case I was just talking about, this statute which you refer to does not apply to those at all?

Doctor WHITE. It does not touch them at all.

Mr. HAY. So that in those cases you would proceed under the law before the passage of this law?

Doctor WHITE. Yes. There is a bill pending in Congress touching that matter, however.

Mr. HAY. Do you know the character of the bill?

Doctor WHITE. It is a bill providing that all arrears of pay of people in the service of the Navy of the United States shall be paid to the superintendent, so as to do away with the necessity of appointing a guardian. I do not know what the status of the bill is now.

Mr. HAY. Does that only apply to the Navy?

Doctor WHITE. That only applies to the Navy.

Mr. HAY. Why should it not apply to the Army?

Doctor WHITE. I have nothing to do with it. I simply know, as a matter of fact, that such a bill was introduced.

The CHAIRMAN. Do you mean a similar bill to the act of 1905 that you speak of?

Doctor WHITE. No; it merely provides that it shall be paid to the superintendent. It does not provide for the disbursing of it after that, as I recall it, the idea, I presume, being that the sailor may draw the pay without having to pay for the privilege of doing so. Then when he is discharged from the hospital, in the natural course of events, it would be paid directly to him or his guardian, if he had one. There is no provision in the bill, as I recall it, for reimbursing the hospital or for any other purpose than merely holding it to pay to him when he leaves the hospital, or his friends or guardian.

The CHAIRMAN. Do you have to give bond yourself as custodian of these pension funds?

Doctor WHITE. I have to give bond as agent; and as agent I not only have custody of these pension funds, but of other moneys which belong to patients. Patients are picked up in the street and come

there and have perhaps \$3 or \$4 on their persons. That is credited to them on our books—and money of that sort.

The CHAIRMAN. And your books show exactly what is credited to them and whether the soldier is entitled to a pension or whether—

Doctor WHITE. We keep an entirely separate ledger for the pension fund and another ledger for the other moneys.

The CHAIRMAN. When money is found on their persons when they are brought in to you, it is taken care of, and an account is kept of it?

Doctor WHITE. Yes, sir.

The CHAIRMAN. I think the next person you mentioned was the record clerk, was it not?

Doctor WHITE. I think I described her duties.

The CHAIRMAN. In connection with the record clerk, there is one thing I want to ask you. In what condition did you find the records when you came to the hospital originally?

Doctor WHITE. On the whole, in the most deplorable condition. Doctor Richardson had started to institute a proper method of taking care of the records; but he had only started, and the great majority of the records were notable for being absent rather than being present. I have endeavored to cover those all into this record room and to classify them and arrange them and institute a regular procedure for noting cases, so that we will have proper records for every individual. I instituted that method not only for patients who are there now, but from the first patient that was admitted into the hospital, covering a period of 50 years. It is a stupendous task. We have been working on it for two years, and I do not think the records are very much good yet. They will be after a while. Some of the recent ones are in very good shape, but a lot of the old ones we have been unable to get into shape as yet.

The CHAIRMAN. What do the records of the patients consist of?

Doctor WHITE. They consist of all papers touching their commitment—for instance, our legal authority for holding them; all correspondence that has been had regarding them; and then the medical history; their examination when they came in; their mental examination; notes from time to time as to their condition, and notes from time to time regarding any extraordinary occurrences, together with blanks giving their examinations of sputum, urine, feces, etc., when those examinations are indicated by the file; everything pertaining to the medical examinations, and the clinical examinations, and everything pertaining to the guardian is filed with the correspondence record.

The CHAIRMAN. How many people are there engaged in that work?

Doctor WHITE. There are two clerks in that office, who do very little else. One of the clerks, in addition, is engaged in looking up the friends and relatives and correspondents of patients who have died there, to whom a certain amount of money may be standing to their credit; and we send out a circular letter to all those people. Here is a copy of it, requesting more information about it, so that we can close our books on the case. That is the money referred to in the appropriation bill. We are sending those letters out.

Mr. HAY. I believe that after five years it shall be covered into the Treasury.

Doctor WHITE. That is what the newspaper says. I have not seen the bill yet.

Mr. HAY. I saw it in the paper myself. The bill has not been printed yet.

(The above-mentioned circular letter, referred to by Doctor White, is filed herewith, marked "Exhibit White No. 3.") (See page 1747.)

Mr. HAY. Returning to the 300 attendants—do you think it would be a wise plan to provide in the sundry civil bill—I think that is the bill that carries the hospital appropriation, and the District of Columbia bill carries one also——

Doctor WHITE. The District of Columbia bill carries the appropriation for the payment of the board of District patients.

Mr. HAY. Do you think it would be wise in that bill for the superintendent to have the appropriations segregated so that Congress could appropriate for so many attendants at so much; and so many supervisors at so much, and so on?

Doctor WHITE. I see no particular objection to that, except that it simply makes a little more machinery in the management. My duties are already pretty arduous, and it would simply make so much work for me, probably. That is all. Otherwise I see no particular objection.

Mr. HAY. Carrying out the idea of making more work for you, do you not think it would be very well to have some one to attend to that part of the business of the institution, and to have control of that? I do not mean control of it, but——

Doctor WHITE. I do not know just exactly what part you mean.

Mr. HAY. I mean the employment of these people, the paying of them, and all that sort of thing. You do not do that, however, I suppose?

Doctor WHITE. I do not pay them personally; no, sir.

Mr. HAY. That is what I mean.

Doctor WHITE. I merely exercise a general supervision over it. I do not conduct the correspondence or interview the applicants.

Mr. HAY. How would this increase your work?

Doctor WHITE. To-day, for instance, if one of my physicians comes to me and says "I have got one or two patients who are troublesome or suicidal on the ward, and I want another nurse," I simply say "All right; go and tell the civil service clerk to get you another." That ends the matter, and that is the simple solution of it. If I was restricted by any kind of legislation, it might make it impossible for me to do that.

Mr. HAY. As I understand it, the authorities claim that they have all the attendants they need—that 300 attendants are all they need.

Doctor WHITE. I think that is a very fair proportion.

Mr. HAY. If Congress appropriated for so many supervisors, so many assistant supervisors, so many charge attendants, so many charge nurses, etc., and a physician came and said he wanted somebody on a ward, you could transfer somebody, could you not? You would still have complete control over the management of affairs?

Doctor WHITE. The only criticism I would make of that is that it would make the administration of the institution less elastic, and of course that means that it is a little harder often to attend to details of that sort. It would be somewhat less elastic.

Mr. HAY. I notice that the statute requires you to file a report of the superintendent. This is section 8411, I believe, of the Revised Statutes: "The superintendent shall make a report to Congress

annually at the beginning of each regular session, which shall show in detail the receipts and expenditures for all purposes connected with the hospital for the fiscal year preceding such session."

Doctor WHITE. Yes, sir.

Mr. HAY. Have you made a report of that kind?

Doctor WHITE. Yes, sir.

Mr. HAY. I have not been able to find it. Is this the one? [Indicating.]

Doctor WHITE. That is only one volume of the report. Previous to the year 1905 the entire string was published in one volume.

Mr. HAY. That is, your report to Congress and the report of the board of visitors to the Secretary?

Doctor WHITE. My report to Congress and the report of the board of visitors to the Secretary was all published in one volume. This past year, by the Secretary's order, that was split up, and the report to the Secretary is published in one volume that you have there, and the financial report, with all these detailed vouchers, was published in another volume. I have not that with me, but it is easy to obtain it if you wish it. (Reports printed as public documents.)

The CHAIRMAN. Will you go to the next department now?

Doctor WHITE. Of course there are some positions I see here that I did not mention. There are some special attendants under the head of "attendants." There are nurses and bath masters and bath mistresses, a matron and housekeeper. Then comes the kitchen service. It has a chef, a head cook, a cook, assistant cooks, truckmen, kitchen firemen for the main kitchen and other kitchens, and kitchen helpers.

The CHAIRMAN. How many people are there in the kitchen service?

Doctor WHITE. I do not know, sir. I have not got it in my head, and I should have to figure it up from the pay roll, and I have not the pay roll here. This pay roll merely designates the positions and does not give the individuals.

The CHAIRMAN. Is there one distinct chef that has to do with all of the kitchens?

Doctor WHITE. Yes. I will read you the designations.

The CHAIRMAN. And the assistant chefs have to do with special kitchens?

Doctor WHITE. The designation "chef" shall apply to the employee having supervision of the various kitchens of the hospital. Head cook—the designation "head cook" shall apply to the employee having charge of the main kitchen. Cook—the designation "cook" shall apply to those employees having charge of one or several of the smaller or detached kitchens. Assistant cook—the designation "assistant cook" shall apply to those employees conducting the cooking operations in the various kitchens under the supervision of those having charge thereof.

All this careful detailed working out of the pay roll is my own work. I have been at this for two years.

Mr. SMYER. What did you enter upon that system for?

Doctor WHITE. When I went there there was no classification, and every time there was a pay day I had about 50 people that I had never seen or heard of who would come to the office and want their pay raised for any one of fifty reasons. So I said: "The thing to do is to get up a detailed, classified pay roll, and not pay individuals, but pay

positions. Create positions all the way through the service, and insist upon the people filling them, and then pay those positions." That has done away with about 99 per cent of the disturbance that I had.

Mr. SMYSER. Is it an improvement?

Doctor WHITE. I could not have lived there if I had had to settle every individual's pay every month.

Mr. SMYSER. Oh, that would not have driven you away.

Doctor WHITE. Well, perhaps not.

Mr. SMYSER. I want to know; I want your judgment.

Doctor WHITE. Absolutely.

Mr. SMYSER. Has it been an improvement?

Doctor WHITE. Absolutely. It is the difference between chaos and order. Then comes the bakery. I think we have seven bakers now, a day and a night force. The bakery works practically twenty-four hours a day. There is the head baker and the assistant bakers. Then comes the domestic service, consisting of waitresses, chambermaids, and ward helpers. Then comes the industrial department, consisting of mattress maker, harness maker, forewoman of the sewing room, forewoman of the mending room, clothing clerk, seamstresses, storekeeper, assistant storekeeper, and steward. Then comes the laundry department—foreman of the laundry, launderer, and laundresses. Then the florist's department, consisting of head florist and assistant florists. Then there is the farm and garden. There is a head farmer, a gardener, foreman of farm—farm, Godding Croft—teamster, and general laborers. Then there is the dairy——

The CHAIRMAN. Do these positions come under the eight-hour law of the Government?

Doctor WHITE. No, sir.

Mr. SMYSER. Are they exempt from it?

Doctor WHITE. Yes, sir; the eight-hour law, I think, does not apply to our hospital at all. We extend the operation of the eight-hour law to skilled laborers, such as carpenters and machinists, as far as we possibly can, and in a large number of those cases in the past year or so I have put them upon a per diem basis, paying them at the regular rate of wage which such laborers get outside; but people in the kitchen service, etc., it would be pretty difficult to put them under the eight-hour law. Then comes the dairy, with head dairyman, dairymen, poultrymen, vineyard keeper, gateman, patrolman, and barber. In the stable department we have the foreman of stable, hostlers, and supervisor of buildings and grounds.

In the construction department we have the foreman of construction, the wheelwright, the head blacksmith, assistant blacksmith-horseshoer, cabinetmakers, carpenters. In the tin shop we have the head tinner, and so forth. In the plasterer's department we have the head plasterer, plasterer's laborer, and in the painters' department we have the foreman and painter. Then comes the engineer department, with chief engineer, assistant engineers, first and second grades, oilers, water tender, fireman, fireman's helper, head plumber, assistant plumber, plumber's helper, head steam fitter, assistant steam fitter, and steam fitter's helper.

The CHAIRMAN. Do you not have to put the steam fitters under the eight-hour law? They have to go under that law, do they not?

Doctor WHITE. They do not have to. We are not under the operation of the eight-hour law at all. As a matter of fact, they do work eight hours. Then we have the electrical engineer, assistant electrical engineer, wireman, wireman's helper, and electrical helper. Then the night watch, consisting of chief night watchman, assistant night watchman, the night watchman at the stable, and the night watchman at the dairy.

Mr. HAY. What does all that cost?

Doctor WHITE. The whole thing?

Mr. HAY. Outside of the 300 attendants. You say that costs about \$100,000. What about the others?

Doctor WHITE. Our entire pay roll is about \$22,000 a month.

Mr. HAY. That includes all employees?

Doctor WHITE. Yes, sir; about 700 employees. You see the ward department costs us about \$100,000 a year. The entire service costs us a little less than \$300,000 a year.

Mr. SMYER. Have none of your employees there made the point on you that the eight-hour law was applicable to them?

Doctor WHITE. There has been some discussion about that, but their own attorney, who testified before this committee representing them, said in his evidence here that he was satisfied and had told them that in his opinion the eight-hour law did not apply, and that is the opinion of the Department too, I believe.

The CHAIRMAN. Tell me something about the farm, will you?

Doctor WHITE. What do you want to know about it, sir?

The CHAIRMAN. Do you know what the farm costs a year to run?

Doctor WHITE. I think I have got it somewhere in figures.

At the time the charge was made against the institution something was said about the cost of the farm, so that I have been to some pains to prepare data upon that point, and I will read it to you if you would like to have me do so, and put it in evidence.

The CHAIRMAN. Certainly.

Doctor WHITE. In regard to the statement made that the experiment of running the farm shows a deficit of \$30,000 the value of receipts (\$43,000) is a fair estimate from comparison figures of the market price of similar products during the time of year when the same was received from the farm, figuring milk at about 18 cents a gallon, extract from Michigan Hospital, and at 28 cents a gallon, \$10,000 same.

The expenditures taken from the last annual report, while correct, are not actual expenditures of the farm, the classification being such as to include pay roll of special appropriation, repairs, buildings, and grounds; the whole of the stable, including care and feeding of 48 horses and 11 mules (only 14 horses and 5 mules being used on the farm), the lawn, flowers, and miscellaneous workmen.

Of the expenditures, one item of \$1,158.87 should practically be charged to lawns and flowers.

Of expenditure of wages, farm, garden, and hauling, \$46,529.08.

It should be—

Farm, garden, and stable.....	\$27,291.95
Lawn and flowers.....	4,246.59
Miscellaneous.....	4,601.67

Railroad track.....	\$559. 63
Repairs engine bed.....	77. 02
Sweeping pavement and roads.....	120. 00
Cemetery.....	840. 00
Repair pavements and gutters.....	842. 50
Straw bed maker.....	165. 00
Whitewasher.....	390. 00
Domestic department (patients).....	1, 136. 83
Carpenter, plumber, etc.....	470. 45
Pay roll, repairs (special appropriation).....	<u>\$10, 388. 87</u>
Total.....	46, 529. 08
Amount that should not be charged farm.....	19, 237. 13

The 40 horses and mules, the cost of which is included in the foregoing statement, were used for different purposes around the institution, 6 for outing for patients, 2 for superintendent, 1 for mail, one for police, 8 for general utility, such as taking patients to and from city, grading, railroad, etc., 2 for messenger and trades wagon to city, six horses and 3 mules for roads, grading, and improvements, 3 horses for lawns, ashes, and laundry, 2 horses and 2 mules for ice, provisions, food, milk, and vegetables, 1 horse and 1 mule for garbage and rubbish. If we were to credit the farm, as did the Central State Hospital of Virginia, the hospital they have cited for comparison, with the use of the above horses, at the rate of \$2.50 per day for a double team, allowing 300 days to a year, we would have an item of \$15,000.

In the report of the farm of the Central State Hospital of Virginia there is credited to the farm 115 tons of ice at \$5 per ton, a total of \$575. We make our own ice and have a refrigerating plant, together equaling 1,500 tons of ice per annum, which if we were to credit to the farm would mean an additional item of \$7,500, but it should at least in our case be credited to the engineer department. If we had no plant for refrigerating, would need 3,000 tons. The farm of the Central State Hospital is also credited with the sale of old castings, calves, hides, etc. The sale of swill, grease, bones, barrels, boxes, live stock, etc., of this institution for the year passed was \$4,231.56.

Making allowances for the foregoing we would not only have no deficit, but show a profit above \$9,000.

That statement in the annual report includes a lot of things which are really not properly chargeable to the farm.

The CHAIRMAN. How long has this farm been a part of the St. Elizabeth's assets?

Doctor WHITE. I do not know, sir. We have the piece of land on which all of the buildings are now, consisting of about 350 acres, taking both sides of the road, practically 175 acres on each side. Then there is the so-called Stevens farm a little way beyond, containing about 60 acres, and about five miles beyond is Godding Croft, which contains approximately 450 acres. That has been in the possession of the hospital for some time since Doctor Godding's administration. I do not know how many years.

The CHAIRMAN. All of that farm was owned by the institution before you came there?

Doctor WHITE. Yes, sir; before I came.

Mr. HAY. What crops do you raise on the farm?

Doctor WHITE. We raise a considerable amount of fodder corn, which we cut up and put in our silos to feed the cows for the dairy

herd. We raise a considerable number of sweet potatoes. We never have been very successful with white potatoes. We raise peas and a large number of cabbages and vegetables of that character. Then in addition to that we have a large vineyard, and last year we took 7 tons of grapes from our vineyard, and a little fruit, but not very much.

Mr. HAY. How much of this farm is in grass?

Doctor WHITE. In grass?

Mr. HAY. You have to have grass for the cows, do you not?

Doctor WHITE. Well, we feed them—no, we buy most of the fodder for the cows.

Mr. HAY. At this season of the year do you not turn the cows out on the grass?

Doctor WHITE. They do not get much of it.

Mr. HAY. You do not cultivate all of that 510 acres of land, do you?

Doctor WHITE. No; the 60 acres at Stevens farm is all under cultivation. Of the 350 acres in the inclosure, where the buildings are, most of it is occupied by the buildings. The 175 acres on the west side of Nichols avenue is totally occupied by buildings and none of it is cultivated, and on the other side some of the 175 acres is occupied by buildings and the rest in fodder corn usually. Up at Godding Croft, 450 acres, there is really the farm and that is cultivated. There is some of that, however, which is pretty poor land, where the hardpan sticks out at the top. It is wavy land and not very well cultivated.

Mr. HAY. What I want to get at is, what the farm of 450 acres cost, Can you give me any idea? I do not mean the 60 acres.

Doctor GODDING. I have not divided the farm. That means the whole business.

Mr. HAY. What is the purpose of this 450 acres? Was it bought with the idea that the patients should work there and give them something to do?

Doctor WHITE. I do not know what idea Doctor Godding had when he bought the farm. The idea of having a farm in connection with the hospital is twofold—to raise food which may be utilized and which can be raised at less expense than it can be bought at, and not only at less expense, but it is usually better because it is fresher. Then, of course, another reason is to employ the patients.

Mr. HAY. How many patients do you employ on the 450 acres?

Doctor WHITE. About a dozen there now, but I have included an item in the appropriation bill requesting, I think, \$3,000 to make some additions to the farmhouse up there, building an additional dormitory, so that more patients can be put there, not only for the benefit of the patients, but also to get farm products cheaper.

Mr. HAY. Is it or not true that farm work and outdoor work of that kind is the best thing for a patient who is able physically to do it?

Doctor WHITE. I think it is the most admirable class of work for the chronic class of insane.

Mr. HAY. How many patients could be employed there, in your judgment?

Doctor WHITE. We have a dozen there. I think if we put a dozen more there it would be all that would be necessary to do the work in connection with the farm.

Mr. HAY. I mean for the benefit of the patients now.

Doctor WHITE. If you put in more than that it would take away from the work of the twenty-four. I do not think that more than

twenty-four or twenty-five patients could be employed there to advantage.

Mr. HAY. To the advantage of the institution or the advantage of the patients?

Doctor WHITE. I hardly think so.

Mr. HAY. You mean to the advantage of either?

Doctor WHITE. That is what I mean.

The CHAIRMAN. How many patients are employed in various lines of work altogether at the asylum?

Doctor WHITE. Approximately 600. That includes people who do very simple work, such as running mops and polishing floors; from that all the way up to complicated work—people who are able to work in the machine shop, or something of that sort.

Mr. SMYSER. Do you fertilize that farm?

Doctor WHITE. We have to do some fertilizing; yes, sir.

Mr. SMYSER. What do you do with the manure out there?

Doctor WHITE. We use that for fertilizing purposes.

Mr. SMYSER. Do you get any manure from the city or from any other place?

Doctor WHITE. We have to buy some. I guess we buy one or two hundred dollars' worth a year, something of the sort. Recently we have been adding so much to our lawns, in putting up the new buildings, and the acreage of lawns has increased so greatly that last year we bought two or three hundred loads of manure in order to distribute it over the lawns.

Mr. SMYSER. Do you keep any hogs out there?

Doctor WHITE. We always have, but within the past three or four years we have had two epidemics of swine plague or hog cholera, I don't know which. We have no hogs now, but the farm has authority to hunt up a few to stock a new colony with.

Mr. SMYSER. What do you do with your dishwater and offal out there at the institution?

Doctor WHITE. Our dishwater?

Mr. SMYSER. Do you not wash dishes?

Doctor WHITE. It goes into the sewer. We have grease traps in the pipes, so that the grease is taken out, and the grease is sold.

Mr. SMYSER. Out in our country all that sort of stuff goes into hogs. With bran and corn it makes pretty good feed.

Doctor WHITE. When we have hogs we usually run in the neighborhood of 100 hogs, and we have more swill than they can eat, and what we have additional is sold.

Mr. SMYSER. Would it not be advantageous to keep more than 100 hogs?

Doctor WHITE. We have not any room for more, and the present accommodations are miserably inadequate. I have asked Congress this year to give me additional money to put up a dozen pens. The pens there now are in a very dilapidated condition and very old and very antiquated in construction.

Mr. HAY. I see one item here for feed, \$12,204, and an item for hay and straw, \$8,866.71, making in all about \$21,000.

Doctor WHITE. Yes.

Mr. HAY. That is a pretty heavy item, it strikes me. You can feed a good many horses for that. How many horses have you; forty?

Doctor WHITE. I think there are forty-eight horses and mules.

Mr. HAY. And how many cows?

Doctor WHITE. About one hundred and fifty.

Mr. HAY. Of course, you can not begin to raise stuff enough on the farm to feed those animals?

Doctor WHITE. No.

Mr. HAY. That is all the live stock you have?

Doctor WHITE. We have some hens.

Mr. HAY. Chickens?

Doctor WHITE. Yes.

Mr. HAY. I am talking about stock.

Doctor WHITE. That is all the stock we have.

Mr. HAY. I see you expended last year for stock \$2,600. What stock was that?

Doctor WHITE. That was largely cows, probably. We pay from \$40 to \$50 for a cow, and we keep a tuberculin-tested herd, and the minute a cow reacts to the tuberculin test we kill or sell her and put in a new cow, and in many cases where a cow runs dry we find it more advantageous to put in new cows than to feed them until they milk again.

The CHAIRMAN. How many cows have you on the farm?

Doctor WHITE. About 150.

The CHAIRMAN. Have you bulls there, too? Do you raise calves?

Doctor WHITE. I think we have three bulls.

Mr. HAY. I suppose you sell the calves, or do you keep them in stock?

Doctor WHITE. We sell some—I couldn't answer that question.

Mr. HAY. You sell the steers, I suppose, and keep the heifers?

Doctor WHITE. I would not want to commit myself on that. I am not very much of a farmer.

Mr. HAY. What sort of stock is this you have there?

Doctor WHITE. Just ordinary cows.

Mr. HAY. What sort of a stock of bulls? Shorthorns?

Doctor WHITE. I do not know, sir. I think they are probably Holsteins, or something of that sort. I don't know very well. I don't suppose I would know if I saw them.

Mr. HAY. I suppose you try to keep improved stock?

Doctor WHITE. I do not suppose we keep very high-grade stock, but there is not a cow in the herd that will react to the tuberculin test. The milk is good and it is not necessary that it should come from blooded stock out there.

Mr. HAY. That is true, but some stocks give more milk than others. I presume you want to keep the best milk herd?

Doctor WHITE. The best milk herd. That is the idea, but I leave the judgment on those things largely to our veterinarians.

Mr. SMYSER. What sort of a farmer have you out there? Is he up to snuff?

Doctor WHITE. Well, he is a pretty good sort of a fellow. He has been there a good many years.

Mr. SMYSER. Maybe he has been there too long.

Doctor WHITE. I do not think Mr. Green is up to modern scientific methods of farming, but he is a thoroughly reliable man, who devotes his entire energies to the institution, and is absolutely interested in his work and does the best he can, and that combination might be better than a scientific farmer who did not have those qualities.

Mr. SMYER. I made that suggestion about hogs, and I will tell you what has happened in my own town. We have a children's home there and they have 100 acres of land, and the average number of inmates is about 95. Some three or four years ago a gentleman was put on the board and he found that they did not raise enough potatoes. They did not raise enough wheat.

They had not lard or anything else. But by the application of a little common sense to the institution they now sell wheat, they sell potatoes, they sell hogs, they sell lard, and they have accumulated a surplus of over \$3,000. That is the result of the application of common sense of an observing farmer to the situation.

Doctor WHITE. Yes, sir; that is a very good thing; but you had there a proper proportion of land to patients. In order to make the ideal proportion of land to patients you must have an acre per patient. You have there about 100 acres and about 100 patients. That is the ideal proportion, if you want to make the land pay; but we have not anywhere near that. Still, our figures show that we made \$9,000 out of our farm.

Mr. HAY. You put up all your own ice?

Doctor WHITE. Yes, sir.

Mr. HAY. And fill your own ice house?

Doctor WHITE. We could not buy it at anywhere near the amount of money it costs us to make it in this part of the country. It is very warm here, and we do not stint the use of ice in the wards.

Mr. HAY. You haul the ice up and put it into the ice houses with your own horses and teams?

Doctor WHITE. Yes, sir; we draw it all and you also know that we have a cold-storage plant. We get our ice very cheap. It costs us about \$1.10 a ton; and we could not buy it for double that.

Mr. HAY. Do these 150 cows produce all the milk you want?

Doctor WHITE. They will. Of course you know cows will run dry sometimes. A dozen or fifteen of them will go dry at the same time, and then we use all the milk that we produce and buy a little more, for the purpose, principally, of keeping in touch with the supply in case we should need it. We use from 250 to 300 gallons of milk a day.

Mr. HAY. It has been testified that some of the patients do not get any milk, in some of the wards.

Doctor WHITE. I do not think milk is furnished as a regular article of diet. It is only furnished to people who are on a sick diet and who need it. You see 300 gallons of milk a day, for all purposes, cooking, etc., would not permit of its being furnished to everybody. We feed over 3,000 people there three times a day.

Mr. HAY. And you could not furnish milk to all of them?

Doctor WHITE. No; not with such an amount of milk as that we could not.

Mr. HAY. There has been something said this morning about your duties at the hospital. I see the statute says "That a superintendent shall be a well-educated physician, possessing competent experience in the treatment of the insane; he shall reside on the premises and devote his whole time to the welfare of the institution; he shall, subject to the approval of the visitors, engage and discharge all needful and useful employees in the care of the insane, and all laborers on the farm, and determine their wages and duties." (See page 1786.)

You do devote your whole time to the institution?

Doctor WHITE. Why I think I do. I do some things, perhaps, which might be considered as not devoting my whole time to the institution. For instance, I do some of the medical legal work for the District attorney's office. They look after my court cases and I reciprocate by looking after some of their medical legal cases. There is no compensation for that. I see occasional cases in the city, in consultation, which does not take much of my time. I do some lecture work in the medical college. I am professor of nervous and mental diseases in Georgetown University, of mental diseases in the George Washington University, and I lecture on insanity at the United States Naval Medical School.

It has been my desire to encourage as far as possible the members of my staff to hold teaching positions; and I am absolutely and firmly convinced that if the members of a medical staff hold teaching positions in institutions, and by so doing are forced to keep abreast of the times in their particular specialties, coming into daily and frequent contact with members of their profession, that their utility to the institution is very greatly increased. If we could look over the different institutions of the world, we would find that the progressive institutions of the world are those which are connected in some way with some medical college and where the members of the staff hold teaching positions. Those are the institutions where progressive medical work is done, and the other institutions are where the medical men get into ruts and do not progress. Although that may not be, in one sense, considered as devoting my entire time to the hospital, yet I think that it is of the utmost importance to the welfare of the institution that these things should be done.

Mr. SMYSER. Are you called to Baltimore, Philadelphia, and New York as a witness at different times?

Doctor WHITE. Once in a great while.

Mr. SMYSER. Take Doctor Eyman, the superintendent of our institution at Massillon; we frequently call him to Wooster, and I know that he has been called to Cincinnati as a witness.

Doctor WHITE. Yes; I go as witness in cases. One of the last cases I was called in was a case where I was called by United States Attorney Sullivan at Cleveland, Ohio. He sent for me and wanted me to come down and testify in the Cassie Chadwick case provided she put in the defense of insanity. She did not do it, and I did not have to go.

Mr. SMYSER. Then you did not have the pleasure of meeting Cassie?

Doctor WHITE. I did not have that pleasure. I am called from time to time as an expert in cases. In the course of my professional career I have done a great deal of court work, and I think it is an advantage, although some do not think so. I never went into a court case in my life that I did not learn something, and everything I learn makes me a more valuable officer to the hospital—not only about medicine but about hogs.

Mr. HAY. How long do you suppose these different trips you speak of occupy your time? How much does it take you away from the institution, on an average?

Doctor WHITE. It is a very inconsiderable amount of time, but I could not say how much. I lecture one hour a week right through the year. In my lectures on mental diseases the different classes come together, so I do not have to go to different places. There is an occasional consultation in the city, I presume a couple a month, or some-

thing of that sort. In the district attorney's office I have two or three cases a year, and aside from that I have perhaps three or four or five or six cases of other kinds in court; but I do that work largely in my own time—that is, I work up these cases evenings and outside of office hours.

Mr. HAY. The medical staff there has no set time for taking a vacation?

Doctor WHITE. That is entirely within the discretion of the Superintendent and dependent upon the welfare of the service.

Mr. HAY. Your own vacation is also in your own discretion?

Doctor WHITE. I have had practically no vacation since I have been there, except ten days last summer. I hope to have a vacation this summer.

Mr. HAY. I mean it is within your discretion to take it?

Doctor WHITE. It is within my discretion, but I always consult the secretary and always notify the Department whenever I leave town for any purpose. I notify them where I am going, so that I can be reached. I do not know that I have to do that.

Mr. HAY. The sundry civil bill of 1905 has an appropriation for the hospital of—

Doctor WHITE. Something like \$300,000. I do not remember just what it is.

Mr. HAY. There is one appropriation for \$305,800. The bill also carries an appropriation for the buildings and grounds of the hospital of \$50,000; for improvements to roadways and grading walks, \$10,000; for increased reservoir capacity, \$6,750; for providing coal trestles and storage capacity for anthracite coal, \$2,500, and for the extension of the cold-storage plant, etc., \$7,500, making in all about \$370,000.

Doctor WHITE. Yes, sir.

Mr. HAY. In that bill?

Doctor WHITE. Yes, sir.

Mr. HAY. Then in the appropriation bill for the District of Columbia you are given for the fiscal year beginning July 1, 1906, \$272,800?

Doctor WHITE. Yes, sir.

Mr. HAY. So that you have in all an appropriation of something like \$700,000?

Doctor WHITE. Yes, sir.

Mr. HAY. Which is a per capita of about how much?

Doctor WHITE. About \$290, I think.

Mr. HAY. Is that per capita much larger than that of any other institution in this country?

Doctor WHITE. \$290 is much larger; but no other institution figures its per capita upon all these special appropriations. The per capita is figured in general and properly upon the basis of the appropriation for support.

Mr. HAY. You have for support \$305,000?

Doctor WHITE. Yes; of course we only get so much of the appropriation of \$272,000 as the District pays us for patients at \$220 per annum each. The District never, until the past year, has paid us anything like the amount of money it owes us. They owe us approximately a million and a half of dollars, since 1891, when the United States assume to pay one-half of the District charges.

Mr. HAY. Then you have for the old soldiers this appropriation of \$305,000.

Doctor WHITE. Yes; at \$220 per capita for support. Of course support includes all salaries and wages, food, clothing, light, heat, and the maintenance of the plant. The repair appropriation is a special appropriation and is an appropriation which, in some States, is provided for under the caption of "Extraordinary repairs."

In other words, under the Comptroller's decisions, if a certain portion of the plant, for instance a steam pipe, rusts through or wears out it is replaced from the support fund; but if we want to put in some additional steam line for the sake of better utilizing our power, that is an extraordinary affair and would come out of the repair fund.

Mr. HAY. Do you think these appropriations are ample for the support of the institution?

Doctor WHITE. They were last year. Year before last is the first year in the history of the institution when there has not been a deficiency, that I know of. This year there has not been a deficiency, and I think the principal reason is because we are looking after the District appropriation more carefully.

Mr. HAY. In other words, you insist upon their paying you what they owe you?

Doctor WHITE. Yes; and they never have heretofore. A peculiar custom was prevalent heretofore. When, at the end of the fiscal year, they found there was a deficiency, the superintendent went to the Appropriation Committee and asked for a deficiency appropriation, and in many cases it was due to the default of the District in not paying their charges; yet none of it was ever charged to the District; so that to-day they owe us approximately a million and a half of dollars.

Mr. HAY. That appropriation was always made; was it not?

Doctor WHITE. They have to figure on the probable number of patients, eighteen months in advance, and they never have figured on enough patients, until this past year when we rather insisted that they should calculate for more patients, so that they would have enough to pay what they owe us.

The committee thereupon, at 4 o'clock p. m., adjourned until tomorrow, Friday, June 1, 1906, at 10 o'clock a. m.

HOUSE OF REPRESENTATIVES, *June 1, 1906.*

The committee met at 10 o'clock a. m.

Present: Messrs. Olcott (chairman), Smyser, Barchfeld, Hay, and Wallace; also Dr. White, Mr. Fenning, Mr. Evans, and others.

TESTIMONY OF DR. WILLIAM A. WHITE—Continued.

Dr. WILLIAM A. WHITE, having been heretofore sworn, was examined and continued his testimony as follows:

Mr. HAY. Doctor, we were talking about arrearages of pay, I think, when we adjourned. How many soldiers who are admitted to the hospital are entitled to arrearages in pay?

Dr. WHITE. Soldiers, enlisted men, who are admitted from the Army are almost immediately discharged from the Army, so that there are very few enlisted men from the Army who are entitled to anything more than they may have been entitled to when they were admitted, except commissioned officers. The Navy, however, does not discharge their men so promptly, and sometimes an enlisted

man in the Navy will stay there for a number of months and still continue on the pay roll until, often times, the enlistment may expire. I don't know how many such cases there are, because we are constantly taking in men from the Army and Navy and constantly discharging them and closing their accounts.

Mr. HAY. I understood you to say the only way those men can draw their arrearages of pay would be by the appointment of a guardian?

Dr. WHITE. That is not the only way, if they are mentally competent.

Mr. HAY. I understand; but if they are not?

Dr. WHITE. If they are not, the only way is by the appointment of a guardian, unless they recover.

Mr. HAY. If they continue inmates, the guardian funds are turned over to the asylum?

Dr. WHITE. No, sir; the guardian handles the funds himself, as guardian, and often times turns over certain amounts for the personal use of the pensioner, if it seems desirable, but he never turns the fund over to the hospital in toto, unless perhaps to close the account when there is only a small balance remaining, or some such reason as that; but the guardian could not turn the fund over to the hospital very well without a special order from the court.

Mr. HAY. I suppose anything he did would be upon order from the court?

Dr. WHITE. In which case, if he does, it is usually upon the same order that discharges him from guardianship, and to close the account.

Mr. HAY. Are there other cases in which funds belonging to soldiers come into the hands of a guardian except in the case of arrearages of pay and pensions?

Dr. WHITE. Any other moneys, you mean?

Mr. HAY. Any other moneys.

Dr. WHITE. I don't think so; of course occasionally a person may have a personal estate. For instance, a person, a soldier or civilian, becomes insane and is sent there, and he may have some interest in some real property somewhere which is mortgaged. It is necessary that some party should act for him in order that the mortgage be not foreclosed, or something of that sort. To protect his property interests it is necessary that a guardian should be appointed; but those cases are not frequent.

Mr. HAY. Doctor, do you provide out there smoking rooms for patients?

Dr. WHITE. Yes, sir.

Mr. HAY. What is the character of those rooms?

Dr. WHITE. They are fireproof; that is the principal feature of them.

Mr. HAY. How many are there?

Dr. WHITE. There are two—one in the detached group of buildings in the inclosure and one outside, that a man who has parole can frequent.

Mr. HAY. How many people can go in them at a time?

Dr. WHITE. That depends on how much crowded they are.

Mr. HAY. That is what I mean.

Dr. WHITE. They will accommodate a dozen or fifteen people, each one of them, very readily.

Mr. HAY. I suppose you provide chairs for them to sit down, and everything of that sort?

Dr. WHITE. Yes; chairs and tables. They go in there and play cards and smoke.

Mr. HAY. Do you have any such thing there as a reading room?

Dr. WHITE. There is no special reading room. We furnish reading matter and distribute it around through the wards, and of course each ward has what is known as a day room. It amounts to a sitting room.

Mr. HAY. Is there anything like a library there?

Dr. WHITE. There is a patients' library; yes, sir. It is not working at very high efficiency just now, because we are in process of reorganizing the library proposition. We have a good many books, and some small accumulations of books upon separate wards.

I have just appointed a librarian, who came last night, whose primary duty will be to take care of the new medical library I am incorporating; but as soon as she gets that thoroughly installed, I will probably have her look after the distributing library to patients, too. Probably she will need an assistant for that.

The CHAIRMAN. How many volumes have you there for the patients?

Dr. WHITE. I don't know; but distributed around at different places, I presume there are two or three thousand altogether.

The CHAIRMAN. There is a large number of the patients who can read, or like to read?

Dr. WHITE. Quite a number; yes, sir. Then we take quite a number of magazines. We take all the current magazines, the Munsey, Argosy, Cosmopolitan, etc., and distribute them around on the wards.

Mr. HAY. Then I suppose the friends of patients bring them?

Dr. WHITE. Oh, yes; a great many private individuals, and I think some clubs in the city here, donate their magazines after they have used them, to the hospital, and we send and get them and distribute them.

Mr. SMYSER. Do you take Everybody's Magazine out there?

Dr. WHITE. I don't know whether we do or not.

The CHAIRMAN. The judge wants to know whether you feed your patients on the pabulum or the kind of stuff that is brought out by Thomas W. Lawson. That is the matter he is worried about.

Mr. HAY. Doctor, what is your opinion as to the employment of a certain class of patients who are not actively disturbed and who are able to perform clerical work and various other kinds of work.

Dr. WHITE. I think it is better for everybody, whether they be sane or insane, who is physically and mentally able to do any sort of work, that they should be employed. We do not employ very many people among the patients in clerical work, because our experience has not been very happy in that line. They sometimes make errors which it is more work for somebody to correct than it is to have done it in the first place.

Mr. HAY. Do you pay any of these patients.

Dr. WHITE. Very few patients get paid a nominal sum. It has been my policy not to pay them. The main reason being that I thought, on the whole, it rather discourages people to work. For

instance, if John Smith ought to work for his own welfare, he often will say he will not work unless he gets paid because William Jones is getting paid, and that is a principle which, if it went all through the institution, would result in a tremendous number of people asking to be paid, and that wage would have to be constantly raised all the while to induce them, when, as a matter of fact, it is for their own interest, and the work we offer them should appeal to them from that standpoint rather than from the money consideration.

The CHAIRMAN. Doctor, of the patients who are employed, how many of them work out doors?

Dr. WHITE. I presume at least seventy-five.

The CHAIRMAN. That is the best form of work that the mildly insane patients can have, is it not, generally?

Dr. WHITE. It is the best form of work for the type of man who is fitted for it; a strong, physically able-bodied man who is accustomed to outdoor work. Of course we have some insane people who never have done any such thing. For instance, if we get a clerk from one of the Departments who has done mental work all his life, we could hardly expect such a man to go out with a pick and shovel; but for the criminal classes, and the negroes, who have led a laboring life, that is the natural form of work to engage in. That is what they can do; what they are accustomed to do, and practically all they can do.

The CHAIRMAN. You try to give them work that is most appropriate for each individual?

Dr. WHITE. Most appropriate; yes, sir.

Mr. HAY. A class of patients was spoken of by someone who are practically cured and yet you can not turn them off on the world. They have no place to go and no means. Would it not be well to pay them something for a while, so as to enable them to have some way in which to start?

Dr. WHITE. Well, I don't know that there is anybody who exactly answers that description. We have some people who get along very well most of the time, but I do not think it would be good policy to start in and employ that sort of patient. We do not want to make the institution attractive for that class of people.

Mr. HAY. The idea was suggested to me.

Dr. WHITE. In other words, we do not want to make people dependent. If those people can get along outside, they ought to do it.

Mr. HAY. You have a storekeeper there, have you not?

Dr. WHITE. Yes, sir.

Mr. HAY. What is his salary? He is a man named Sanger, is he not?

Dr. WHITE. Sanger. He gets \$1,500.

Mr. HAY. What are his duties?

Dr. WHITE. Mr. Sanger occupies a position which I largely created myself. We had a storekeeper there when I went there whose main duties were to receive all of the supplies of the hospital at the store and to issue them; largely the same work that any country storekeeper would do in taking in supplies and weighing them out and sending them to different places.

The conduct of the store under those circumstances was extremely unsatisfactory, because the storekeeper merely gave out what he received orders for, and there was no accurate account kept with the different departments as to what they received, and there was no ready way of finding whether a certain department was receiving as

much as it did the previous year, or not. So I got, through the Civil Service Commission, Mr. Sanger, who is an expert accountant, and gave him charge of the storeroom, and prescribed his principal duty, which was this, to institute an accurate method of cost accounting for the hospital for each of its departments, and, working together with me, to install a complete set of books, blotters and ledgers, and receipts, etc., to that end.

So that his duties are very much wider than those of the old store-keeper, who merely had to receive and issue. The office as it is now conducted is a rather complicated one. It involves expert accounting all the way through.

Mr. WALLACE. Doctor, you define the criminal insane as insane people with criminal tendencies who have not been convicted of crime. Do not the best authorities on that subject agree that those patients ought to be cared for in an entirely separate building? For instance, let me submit some authorities to you.

Criminal insane.—The best authorities on the subject agree that the criminal insane should be cared for in an asylum or institution entirely separate from the asylum where other insane persons are kept. (Biennial Report of the Insane Asylum for the State of Louisiana (1904), pages 24 to 30, inclusive. Dr. C. Pierson, superintendent State Asylum, Louisiana. Dr. Warsham, superintendent State Asylum, Austin, Tex. Dr. H. B. Meridith, superintendent Insane Asylum, Danville, Pa. Dr. Marvin Graves, superintendent Southwestern Insane Asylum, Texas. Dr. T. O. Powell, superintendent Georgia State Sanitarium. Governor Griggs, of New Jersey, late Attorney-General of the United States. Dr. Isaac Ray, author of Ray's Medical Jurisprudence. Dr. Archibald Church, Chicago, alienist and author of great reputation. Dr. Arthur H. Harrington, medical director of the Massachusetts State Asylum for Insane Criminals. Mr. Clark Bell, a learned medico-legal jurist and author. Dr. William F. Drewry, superintendent Central State Hospital for the Insane, Petersburg, Va. Dr. William D. Berry, noted author and writer. Report Superintendent of West Virginia Hospital for the Insane, 1903-1904, page 67. Oregon State Insane Asylum, Report 1905, page 14. Colorado State Insane Asylum, Report 1903-1904, page 10. Illinois Asylum for Insane Criminals, Report 1904 (showing that the State of Illinois has acted on this principle and established a separate asylum for the care of insane criminals). Tennessee Eastern Hospital for the Insane, Report 1903-1904, pages 7 and 8. Texas State Lunatic Asylum, Report 1904, page 14. Massachusetts Public Document No. 24, page 47, which shows that Massachusetts has established and is maintaining the "State Asylum for Insane Criminals.")

Dr. WHITE. I think they do, and I think we do that.

Mr. WALLACE. You know all those institutions, I suppose?

Dr. WHITE. I know most of them.

Mr. WALLACE. On the subject of nonrestraint here are a number of authorities [handing the witness a paper]. Do you recognize them as good authority?

Dr. WHITE. Some of these are reports from State institutions. I don't know who the superintendents are. I can't recall. The other people—I simply know there are such people. That is all.

Mr. WALLACE. A good many of these are reports that have been examined. I would like for those authorities to go in, Mr. Chairman.

The CHAIRMAN. Put them in, so that we can refer to them to explain your questions.

The paper referred to is as follows:

NONRESTRAINT.

The best authorities on the subject agree that physical restraint of the patients is not necessary nor desirable in the management and control of insane persons. The strait-jacket, rest sheet, and other like appliances have long since fallen into disuse in all well regulated and progressive institutions for the care of the insane. (Dr. William F. Drewry, superintendent Central State Asylum of Virginia, report of 1905, page 12. Blue Book, 1905, State of Illinois, report of Dr. George A. Zeller, superintendent Illinois Asylum, Peoria, Ill. Dr. J. S. Turner, superintendent North Texas Asylum, report of 1904, page 22. Fourteenth Biennial Report Topeka State Hospital, Topeka, Kans., page 6. Report Board of Control, Asylum for the Insane, Arizona, 1903-1904, page 17. Rules 5 and 6 Insane Asylum of Louisiana, Report 1904, page 34. Western State Hospital of Virginia, Report 1904, page 13. State Lunatic Asylum of Arkansas, Report 1903-1904, page 32. Colorado State Insane Asylum, Report 1903-1904, page 8. Missouri State Hospital No. 2, Report 1905, page 18. Tennessee Eastern Hospital for the Insane, Report 1903-1904, page 43, rule 6. Delaware State Hospital, Report 1904, page 83, rule —. Treatise on Insanity, by Dr. Wm. A. Hammond, pages 726 and 727.)

The CHAIRMAN. Doctor, I would like you to state, generally, what you have done since you became superintendent to lessen restraint, especially in the way of the practical elimination of mechanical restraint, that has been mentioned here.

Doctor WHITE. Here is an order of mine issued to the medical staff, dated January 27, 1904. It reads:

"To the medical staff: I wish you would see that the so-called saddle be absolutely discontinued in your department as a means of mechanical restraint."

That is the only official order that I have issued in that connection. Then I have installed there two hydro therapeutic rooms, and we are using hydro-therapy in place of restraint, to a large extent. The use of packs and other hydro therapeutic means is the best possible way to do away with mechanical restraint, and it is the best substitute for mechanical restraint.

All the cases throughout the hospital that are in restraint at all are reported to me, and I keep in touch with them, so as to feel perfectly satisfied myself, in every instance, that it is necessary. There are cases where mechanical restraints—I do not care what anybody says to the contrary—are, I believe, absolutely necessary. For instance, we had a man over in one of the buildings not long ago who was trying to gouge his eyes out. Now, I say any physician who will refrain from using the proper restraint to prevent that man from accomplishing that act is not fit to care for an insane man.

His feelings with regard to restraint partake of the nature of sentimentality, which reacts to the detriment of the patient. I know how hard it is to watch a patient, and I know that such patients will elude the vigilance of the most careful attendant, no matter how thoroughly he watches them, and when the eluding of that vigilance may mean a human life or the destruction of eyesight, then restraint must be used, if we are going to consider the welfare of our cases. There are not many such cases, and I discourage its use except where it is necessary. There are some cases where it is necessary, and so far as I can see, it will always be necessary; but there are very few.

The CHAIRMAN. None of these jackets are ever used without the direct order of a physician?

Doctor WHITE. By the order of a physician only.

The CHAIRMAN. The attendants themselves have no authority in that regard?

Doctor WHITE. They have no authority in those matters; no.

Mr. WALLACE. Mr. Chairman, I would like to proceed with some questions I have, so that they may be before the whole committee, and everybody may get a chance to cross-examine on them, if you please.

The CHAIRMAN. I am perfectly willing.

Mr. WALLACE. Then I will be about through.

The CHAIRMAN. I have a great many more questions to ask in regard to specific matters.

Mr. WALLACE. I can get through with this in a few minutes.

The CHAIRMAN. I beg your pardon, Mr. Wallace. I thought you had finished when I started in.

Mr. WALLACE. Doctor, were you ever the superintendent of any asylum for the insane before coming to St. Elizabeth's? I believe you have answered that.

Dr. WHITE. I was not.

Mr. WALLACE. You said you were connected with others. During your experience with the insane, have you ever discovered any principle of management or treatment that has proven to be a distinct advancement over old methods?

Dr. WHITE. Yes, sir. In conjunction with two other physicians in New York, we published a work some years ago which was a work of original research in such classes of mental diseases, and distinctly outlined the form of treatment. It was the first work of the sort that had ever been done in this country, and in some respects the first work of its character which had ever been done anywhere, so far as I know.

Mr. WALLACE. Is that in use at St. Elizabeth's?

Dr. WHITE. No, sir. It requires very careful psychological training in laboratory methods, etc., to apply it.

Mr. WALLACE. Do you not think that the better plan is to have the epileptics cared for in an institution entirely separated from the ordinary insane?

Dr. WHITE. As a general principle; yes, sir. They are separated in the Government hospital.

Mr. SMYSER. Mr. Wallace, do you mean separate buildings, or in separate grounds away from the others?

Mr. WALLACE. Separate buildings. For instance, a separate institution.

Dr. WHITE. I think separate buildings answer all the purposes in cases such as we have. All of our epileptics are demented or insane epileptics. The particular advantage which a special institution has for caring for epileptics is in caring for what we might call the sane epileptics, with a view to curing them and restoring them. A good many epileptics are cured in such institutions.

Mr. SMYSER. Is that institution such a one as we have in Ohio, at Gallipolis?

Dr. WHITE. Yes, sir.

Mr. WALLACE. Do you not think the criminal insane should be kept not only in a separate building, but that they should be kept in a separate and distinct institution?

Dr. WHITE. I do not see any necessity for that. If they are kept in a separate building, it is a separate institution so far as the rest of the patients are concerned.

Mr. WALLACE. If it was a separate institution, they would not come in contact with the other insane, would they?

Dr. WHITE. No; I do not suppose they would. Geographically, that is impossible.

Mr. WALLACE. Have you recommended any separation?

Dr. WHITE. No, sir.

Mr. WALLACE. On the line about which you have just been talking?

Dr. WHITE. No, sir; I don't think there is any particular necessity for such recommendation.

Mr. WALLACE. Is not Doctor Hagner, a patient in St. Elizabeth's, there under a charge of crime, and is he not, though belonging to the criminal insane class, housed in Maple ward, which is the ward where insane officers of the Army and Navy are kept?

Dr. WHITE. Doctor Hagner is a patient there. He is not a criminal. He has never been convicted of any crime; and I believe everybody is presumed innocent until he is convicted.

Mr. WALLACE. Yes; and another principle is that a man is presumed to know the consequences of his own acts. You say he is not a criminal?

Dr. WHITE. No, sir; he has never been convicted of any crime.

Mr. WALLACE. Why is Doctor Hagner, of the criminal insane, living and associating with the innocent insane?

Dr. WHITE. I have said he was not a criminal.

Mr. WALLACE. Is he insane?

Dr. WHITE. Yes, sir.

Mr. WALLACE. He is insane?

Dr. WHITE. He is demented.

Mr. WALLACE. You say the Doctor is not a criminal insane. Is he not there under the charge of crime?

Dr. WHITE. He was charged with crime; yes, sir.

Mr. WALLACE. Will you state what it was, doctor?

Dr. WHITE. We have no record of it. I merely know it because Mr. McNamara looked up the records and said he had been indicted. I don't know what the wording of the indictment was.

Mr. WALLACE. Is not Doctor Hagner on the pay roll of the institution, receiving a regular salary from the Government?

Dr. WHITE. He gets a nominal salary for work he does in connection with the pathological department.

Mr. WALLACE. That was why he received a salary, was it?

Dr. WHITE. Yes, sir.

Mr. WALLACE. What service does he perform, do you say?

Dr. WHITE. He works in the pathological department. He takes notes of autopsies, and things of that sort.

Mr. WALLACE. Can an insane man deserve a salary?

Dr. WHITE. There are many insane men perfectly capable of earning a salary, under certain restrictions.

Mr. WALLACE. Is that just at times, or all the while?

Dr. WHITE. It depends on the case. It might be so all the while with some case. It might be only at times with others.

Mr. WALLACE. Do you have any authority of law, except your general authority to look after everything there, for paying salaries to the insane? You have no special authority?

Dr. WHITE. No, sir.

Mr. WALLACE. Are any other patients on the pay roll in addition to Doctor Hagner?

Dr. WHITE. There are very few. As I have just stated, I have rather discouraged that thing as far as I possibly could.

Mr. WALLACE. Can you name any that are salaried?

Dr. WHITE. No, sir; I can not. There are a few laboring men who get nominal fees for working around the grounds; but I can't recall their names.

Mr. WALLACE. What has become of Mr. Maenche, the foreman of the laundry at St. Elizabeth's?

Dr. WHITE. Mr. Maenche is home at present, on leave of absence. I have his address. I can't tell you what it is now without looking it up.

Mr. WALLACE. He is on leave of absence?

Dr. WHITE. Yes, sir.

Mr. WALLACE. What time did he leave?

Dr. WHITE. He left a very few days ago; perhaps less than a week.

Mr. WALLACE. You did not have him brought here as a witness, did you, Doctor?

Dr. WHITE. I did not summon him.

Mr. WALLACE. Did you have any reason for not summoning him?

Dr. WHITE. No, sir. If you want him you can have him. I did not expect to prove anything by him.

Mr. WALLACE. That was about a week ago—something like that?

Dr. WHITE. A very few days. I sent him home myself.

Mr. WALLACE. He went to his home?

Dr. WHITE. Yes; he came to see me one morning, and I appreciated by the very few moments' talk I had with him that he was very far from well. I asked one of the other physicians to look into his case and if he had the same idea of him that I was impressed with in a few moments' conversation to tell him to go home as fast as he could and stay there indefinitely. He did have that idea, and he went home.

Mr. WALLACE. Did you investigate the charges brought against him by Burroughs?

Dr. WHITE. Which charges; of drunkenness?

Mr. WALLACE. Yes; of drunkenness, or something of that kind.

Dr. WHITE. Yes. When Mr. Burroughs first put in a letter saying that Mr. Maenche was or had been drunk, I did not reply personally to Mr. Burroughs because as a general principle of administration I do not believe in paying too much attention, openly, at least, to charges which people make against their superior officers. I think it is a bad principle of administration, but I—

Mr. WALLACE. Under those circumstances, why did you not discharge Mr. Maenche?

Dr. WHITE. Wait a minute. Let me answer the question. I thought that was a bad principle of administration, but I went to

two people whom I had confidence in and whose business took them to the laundry, and, without explaining to them fully my reasons, I asked them to drop in there from time to time and look about and observe Mr. Maenche in the general conduct of the laundry, and let me know whether they learned anything that would substantiate those charges; and I took occasion myself to go there. I dropped into the laundry and looked around to see whether I could determine anything with regard to them.

Then just about that time, or very shortly after—the date is not at all fixed in my mind—Mr. Burroughs further preferred charges which tended to show that there had been abuse of patients in the laundry. That is a matter I never overlook, no matter where it comes from, and I immediately went at that and investigated it very thoroughly. I did not discover, in the course of the investigation of the conduct of the laundry, anything that would warrant me in discharging Mr. Maenche for drunkenness. I got the same sort of conflicting testimony that you gentlemen have gotten before this committee, and I was not able to satisfy my mind that he had done anything to warrant his dismissal.

Mr. WALLACE. Was there any special reason for your retaining him?

Dr. WHITE. There is always a reason for retaining any man unless there is a reason for dismissing him. I can not dismiss a man without cause. I have no right to do that.

Mr. WALLACE. Had you made a thorough investigation of the charges?

Dr. WHITE. I made an investigation which satisfied me that, so far as I could see, there was no adequate reason for dismissing him.

Mr. WALLACE. Did you think he was incapacitated for the place there, in view of all the evidence?

Dr. WHITE. Mr. Maenche is in many respects a very good man. He knows the laundry business very well. Like almost every other human being, he is not perfect. His failure is in his executive capacity. He is not as able to conduct the institution from an executive standpoint as I would like.

Mr. WALLACE. You say your real reason for not discharging him was that you did not feel justified, under the testimony?

Dr. WHITE. I did not feel justified, from what evidence I obtained, that he had done anything that would warrant such an action on my part.

Mr. WALLACE. Doctor, why did you create the place of clinical director prior to April 1st, of this year?

Dr. WHITE. I had that matter in review for a long time. As it was testified here, I set forth the desirability of that position in my annual report for 1904. It was a very important position. There was no such similar position anywhere in this country; and when an important problem of that sort comes up for consideration, I do not feel competent to solve it in a moment. I reviewed the material for such a position all over this country. I had a good deal of correspondence. I called upon men who were acquainted with people engaged in psychiatric work in the United States.

I offered the position to one man, and went to New York and had an interview with him. The matter was under consideration with him, I believe, for some months. When I first proposed the position to him, he was in Europe. I had to wait for him to come back.

I looked the ground over very, very thoroughly, and, as sometimes happens in problems of that sort, the solution was right under my nose and I did not see it; but I probably would not have gone very much quicker, anyway, because I wanted to satisfy myself that I was doing the very best possible thing that could be done under all the circumstances, and after a thorough review of the entire proposition. When I made up my mind, I acted, and not before then.

Mr. WALLACE. Is it true that the creation of this position and the appointment of Doctor Clark to it by you was brought about by this investigation?

Dr. WHITE. Not by a long shot.

Mr. WALLACE. Is it also true that you have created this place and made this appointment with the idea in mind that it would deter Congress from providing a business manager for the institution?

Dr. WHITE. No; this is the first time that any such thing has been presented to my mind in anyway. I never had any such idea.

Mr. WALLACE. Do you object to newspaper interviews on that subject?

Dr. WHITE. On what subject?

Mr. WALLACE. On the subject of this manager in charge of the business affairs of the institution.

Dr. WHITE. Newspaper interviews?

Mr. WALLACE. Yes.

Dr. WHITE. Do I object to being interviewed?

Mr. WALLACE. Yes.

Dr. WHITE. About a business manager for the hospital?

Mr. WALLACE. Yes; about your business manager.

Dr. WHITE. I don't object to being interviewed about the business management of the institution; no.

Mr. SMYSER. You might possibly say to a newspaper man it was none of his business, might you not?

Dr. WHITE. I might, but I doubt if I would.

Mr. WALLACE. I am just asking these questions so that you can answer them. These things are all in the atmosphere.

Dr. WHITE. Yes, I would rather you would ask them.

Mr. WALLACE. How could it be possible that there could be any conflict with one man in charge of the business affairs of the institution and another man at the head of the medical affairs?

Dr. WHITE. It is almost impossible to conceive how there could not be conflict. That proposition has been thrashed out time and time again. Only under the rarest conditions have two men gotten along together occupying those relative positions, and in those cases they have been close personal friends, or something of that sort; but there is bound to be conflict under those circumstances, and it is a well established principle of hospital administration that it is poor policy.

Mr. WALLACE. In addition to your salary, what else is furnished you, doctor?

Dr. WHITE. Me?

Mr. WALLACE. Yes; by way of compensation.

Dr. WHITE. Just my maintenance.

Mr. WALLACE. Your living?

Dr. WHITE. Yes, sir.

Mr. WALLACE. There has been a good deal of talk about carriages and buggies. How many carriages and buggies have been furnished for your personal use?

Dr. WHITE. There are three carriages there that I use myself.

Mr. WALLACE. And how many horses?

Dr. WHITE. Two.

Mr. WALLACE. For your personal use?

Dr. WHITE. Yes.

Mr. WALLACE. How many automobiles are furnished for your personal use?

Dr. WHITE. Two.

Mr. WALLACE. You have already said you are a single man, I believe?

Dr. WHITE. Yes, sir.

Mr. WALLACE. Doctor, are your meals taken with any particular part of the people there? Do you have your meals separately?

Dr. WHITE. I have them separately.

Mr. WALLACE. You have just stated your board is furnished by the Government. How many servants have you to care for the buggies, carriages, horses and automobiles, which are furnished for your personal use?

Dr. WHITE. They are all in the general stable and are cared for by the stable force. Nobody in particular.

Mr. WALLACE. There is no particular number of servants assigned to that duty?

Dr. WHITE. No, sir.

Mr. WALLACE. They are just general employees there, whose board is paid by the Government, etc.?

Dr. WHITE. Yes, sir. We have a large stable, with a good many horses and a great many carriages, and they are all cared for by the general stable force. Of course there is one man who drives for me usually, but his duties are not solely confined to that. I believe they were under the former superintendent, but I made his duties more general, because I don't use a man enough to keep him solely for my own purposes.

Mr. WALLACE. What salaries are they paid; do you remember?

Dr. WHITE. The coachmen get thirty dollars a month.

Mr. WALLACE. How many are there in that stable force?

Dr. WHITE. I should say there are perhaps a dozen men over there in the stable. I could not tell accurately.

Mr. WALLACE. How many servants are employed in your private kitchen and dining room, and how many house servants?

Dr. WHITE. I have one servant in my apartments, and one cook.

Mr. WALLACE. Do you have oleomargarine or butter on your private table?

Dr. WHITE. I have oleomargarine on my table.

Mr. WALLACE. You use it constantly, I suppose, doctor?

Dr. WHITE. I never had an ounce of butter on my table since I have been in the institution.

Mr. WALLACE. Is there any necessity for a purchasing agent for the institution?

Dr. WHITE. Somebody has to do the purchasing and there is enough work in that business to keep one man busy. The only way in which the position could be abolished would be by incorporating

it in some other position, and then that man would probably have to have an assistant; but it would amount to the same thing.

MR. WALLACE. How about this plan I suggest here? Can not everything needed for the institution be purchased on competitive bids, after public advertisement, the goods of a perishable nature to be delivered in quantities and at times as needed?

DR. WHITE. No, sir; I don't think it would be practicable, because the market value of perishable products is constantly changing, and changing within very short periods of time, and we would have a great deal of difficulty in getting bids. I don't believe people would bid upon those things for any length of time ahead. Then, oftentimes, if we want to avail ourselves of the advantages of the market, we have to be right on hand and see what the boats bring in at the docks, and take what happens to be advantageous to take there, as to price, quality, etc. That is the only reasonable way to purchase for the place. It would be a great disadvantage to the hospital if they had to be purchased in any other way.

MR. WALLACE. If you were relieved of all the business affairs of the institution, and thus left free to devote your whole time personally to the performance of your duties as a medical man, looking after the care of the minds and bodies of the unfortunates in your care, do you not think that better results, on the whole, could be obtained?

DR. WHITE. No, sir.

MR. WALLACE. You do not?

DR. WHITE. No, sir; I think it is much better to have somebody in complete charge of the whole policy and administration of the hospital, and have that man an expert in mental diseases, who can view things from a bird's-eye point of view and direct everything to the best advantage from his standpoint, to control the operation of the institution as a whole. I think any other method would be disadvantageous.

MR. WALLACE. Doctor, what is a Poo-Bah?

DR. WHITE. Pooh-Bah was a character in the Japanese operetta *Mikado*.

MR. WALLACE. He was a sort of generalissimo, was he not?

DR. WHITE. He had everything to do, practically, in the administration of the Kingdom, I believe.

MR. WALLACE. That is what you meant by saying upon one occasion that you were mayor, financier, and everything else over there—or something like that?

DR. WHITE. Perhaps; I don't remember saying it. I saw it in the *Times* last night, but I imagine the gentleman who put it in there drew upon his own imagination.

MR. WALLACE. This was in the *Washington Star*, in February.

DR. WHITE. I might have said it.

MR. WALLACE. I will ask you if you said that, and, if so, do you not think you ought to be relieved of some of your multitudinous duties?

DR. WHITE. There are some things, one thing in particular, that I think I should be relieved of the actual doing of, but I don't think the Superintendent should be relieved of any general administrative work. I am thoroughly satisfied in my own mind that to run an institution of that sort to the best advantage the authority in every portion of the institution must center in one man. The minute you

begin to divide that authority and center it in more than one person you begin to have clashes of authority, and every clash of authority means a decreased efficiency in administration.

Mr. WALLACE. Certainly; every organization should have a head. That is true. Name all the new positions that have been created by you since you have had charge of the asylum, the reason for the creation of each, your authority to create them, and the duties and salaries of each.

Dr. WHITE. I have created the position of storekeeper. I have just described the reason for it and given you the salary—the reason for instituting a more careful and complete and detailed method of business accounting and cost accounting at the hospital. I have created the position of matron in order to more carefully and in more detail supervise the issues of supplies to the various departments of the hospital—the supplies which she has charge of. She gets a salary of a minimum of \$60 a month and a maximum of \$70 a month. I have reclassified a great many positions on the pay roll and renamed them because they were not properly classified nor properly named. I could not begin to give you the number of those. There are a good many.

I created the position of assistant in the pathological laboratory. She is a girl who gets \$35 a month, and her work is to do the mechanical work that the chief of the pathological laboratory would otherwise have to do, so that the work will come to him and he will not have to potter with a lot of mechanical things and can give his attention to the real scientific conduct of the work and be relieved from the mechanical details. I have created the position of librarian, who came there to-day, my purpose being to create a thoroughly equipped up-to-date medical library which will be as good a library as there is in this country on the special portion of medicine with which we have to deal, and which will also be a reference library for everything pertaining to the care of the institution and treatment of the insane.

As a Federal institution we are constantly receiving requests from all over the country for information on those questions. We are constantly receiving delegates from the different States and different countries for information about those questions, and I want to create, in connection with my library department, a general information bureau, so that we can take those matters up consistently and answer all questions in the way in which we can not now do it. It all devolves upon me now, and I have not the time or the energy to go into those matters of detail.

Mr. WALLACE. You state in your report that the per capita cost of a patient per annum at St. Elizabeth is \$220. Why is it that patients at other asylums throughout the country are kept at a per annum per capita cost so much less than at St. Elizabeth, sometimes at less than half?

For instance, the per annum per capita cost at Central State Hospital of Virginia is \$78.09; the Nebraska Hospital for the Insane, \$80.75; State Hospital at Akron, Ohio, \$95.57; Insane Asylum for the State of Louisiana, \$104.87; State Hospital at Massillon, Ohio, \$114.50; Oregon State Insane Asylum, \$119.76—

Mr. SMYER. You are a little shy on the hospital at Massillon.

Mr. WALLACE. This was gathered from the reports. State Hospital at Toledo, Ohio, \$124.60; Eastern Hospital for the Insane, Tennessee, \$125; State Hospital, Stockton, Cal., \$127.75. Just explain the large difference in cost at St. Elizabeth's.

Dr. WHITE. In the first place, if those figures are from that little pink book of the Medical Legal Society, I am not prepared to admit that those per capita are correct. In fact, from my point of view, I know they are not correct, because I have looked them up. However, the general proposition is true that many institutions in the country do have a per capita cost which is materially below \$220, but it is absolutely absurd and ridiculous to compare an institution for the care of pauper negroes with an institution like the Government Hospital for the Insane.

Mr. WALLACE. How many of these are for pauper negroes?

Dr. WHITE. One of them.

Mr. WALLACE. In Virginia?

Dr. WHITE. I don't know. You quoted it at \$78.

Mr. HAY. That is at Petersburg, Va.

Dr. WHITE. Fifty per cent of our population are people whom it is not, in my estimation, the idea of this Government to consider in any sense whatever as paupers nor to deal with them as such. Then again, if you compare this institution with an institution in the South, the single item of coal would make a difference of \$20 per capita. Our per capita cost of coal is approximately \$20. It costs us \$50,000 a year for coal. Down South the coal bills must be very much smaller. I do not know what they are, but they must be smaller. The construction of the buildings in a warm climate is very much cheaper, and the cost of maintenance of a cheaper constructed building is very much less than the expensive buildings that have to be built in the North.

Mr. WALLACE. A good many of these are in the North.

Dr. WHITE. Some of them are.

Mr. WALLACE. That is, the Middle West—Ohio.

Dr. WHITE. Some of them are; yes. Then again we have, I think a larger percentage of people who are unable to work, and in that way are unable to be in any way a source of income to the institution. They come to us, in a large part, from the Soldiers' Homes. We have nearly 700 people in our institution over 60 years of age. We have over 250 people who are bedridden. So that our percentage of people who are helpless and physically infirm is probably larger than it is in any other institution. I think it is. Then again, the character of population from which we draw is essentially and absolutely different from that of any other institution in the country. I can not give you in detail all the differences, because it would involve a question of statistics which would take weeks and weeks to work out.

Mr. WALLACE. I think I understand you on that point, Doctor.

The CHAIRMAN. Mr. Wallace, while the doctor is on that subject I would like to ask him this: Doctor, do you know about the expenses in Binghamton or in the Manhattan State Hospital or Wards Island?

Dr. WHITE. The expenses in Binghamton are \$199 and a fraction; approximately \$200. There are two of the institutions that I think are quoted in that book as having a per capita lower than \$220, which, if their per capita is figured upon the same basis upon which our per capita is figured, have a per capita of \$234. One of them is

the Danemora Institution for the Insane Criminals, an institution which, if any, it would seem would have a low per capita, because such people, criminals, certainly are not entitled to the same amount of consideration that people are who are simply bereft of their reason because of some misfortune and who have not even committed or been convicted of crime.

Mr. WALLACE. In this institution, Doctor, you would not say that the patients are better fed and better clothed and better cared for than in these other institutions?

Dr. WHITE. I think in our institution they have better food than in the vast majority of State institutions for the insane. I have been connected with five institutions, and the food supply in our institution is vastly superior to any one of them. The clothing in our institution is superior to any one of them. The number of employees and the wage rate is higher than in any one of them. On the whole, I think they get better care in our institution than in the majority of State institutions. The reason they get better care is because they are not pauper insane, but many of them are people who have rendered the Government excellent, good service, and it is the policy of the Government not only to take care of them but to take good care of them.

Mr. WALLACE. Doctor, did you ever visit any of these institutions yourself?

Dr. WHITE. I have visited a good many State hospitals. I don't know that I ever visited any of those you mentioned.

Mr. WALLACE. Have you any personal knowledge of these I have mentioned as to how they feed and how they clothe? Did you ever visit one of these?

Dr. WHITE. I don't know. I don't remember all you read.

Mr. WALLACE. I was just asking you about what you stated.

Dr. WHITE. I don't know that I have; but I think I know as much about them as the people who are criticising.

Mr. WALLACE. Is it not true that the per capita cost per patient in a large hospital is less than in a small one?

Dr. WHITE. That is a general proposition which I think is so, within limits.

Mr. WALLACE. In the testimony of Dr. L. H. Taylor, page 857, he states that your work in literature has been way up in the top notch, and that you are a prolific writer on the subject of insanity, and are quoted all over this country and abroad. Please state what books, if any, you have written and published, and which of them are regarded and quoted all over this country and abroad as authority on insanity.

Dr. WHITE. The work I have just cited was written in conjunction with two other men. I have seen it reviewed and commented upon in Germany, in France, and in this country.

Mr. WALLACE. What book was it?

Dr. WHITE. The name of the book is *Psycho-Pathological Researches*, published by Steckert, in New York, who is an importer of foreign works. I have written the article on insanity in Butler's *Diagnostics of Internal Medicine*, which is, I may say, the best work on diagnostics now extant in the English language by an American author.

Mr. WALLACE. That is, your book?

Dr. WHITE. I have written a section on mental diseases in it. There are a number of sections.

Mr. WALLACE. You refer, of course, to the book at large?

Dr. WHITE. Yes, sir; I am not referring to my own work, although my article in it has been reviewed and has been said to be the best condensed résumé of the subject of the diagnosis of insanity in the English language. I don't say that is so, but that review has been made of it.

Mr. SMYER. Suppose you furnish us copies, and we will try and determine as to that.

Dr. WHITE. I shall be very glad to furnish you all of those works.

Mr. SMYER. We would be glad to see them.

Mr. WHITE. I have written the article on Alcoholic and Drug Intoxication and Habituation in the Reference Note Book of Medical Sciences, which is the best encyclopedic work on medicine of American publication. I have written numerous articles for medical journals, which have been quoted in this country and abroad. My article on The Criminal was quoted very favorably in England, and I received a complimentary copy of the Howard Brissson Association work on penology, written by their secretary, as the result of that article. I have, in conjunction with a gentleman in New York, recently published a translation of Dubois's work, *Les Psychonevroses*, which has been commented on by other medical literati as being an admirable production. That is, of course, simply an English translation of a French work, edited by Doctor Jelliffe and myself. I am an associate editor of a German work which is in print now, *Das Arztliche Hausbuch*, which will shortly be out. That is not a scientific work; it is rather a popular work. I am associate on the advisory board of editors of the board of nervous and mental diseases in New York, which is a standard publication in that line.

Mr. WALLACE. Which of your books do you think has been most widely circulated?

Dr. WHITE. I don't know, sir; I couldn't say.

Mr. WALLACE. Your knowledge and practice as an alienist, previous to coming to St. Elizabeth's was confined almost entirely to your experience as an assistant physician at the Binghamton Asylum, was it not?

Dr. WHITE. That was the official position I occupied. I did a good deal of literary work, a good deal of translating and abstracting at that time. I did a considerable amount of consultation work and a good deal of court work all during my residence in Binghamton.

Mr. WALLACE. I believe you have stated already the different positions you held in the institution?

Dr. WHITE. Yes, sir.

Mr. WALLACE. Who first introduced Mr. Frederick A. Fenning to you and suggested the arrangement you made with him, whereby you executed so many petitions for his appointment as committee over the persons and properties of your ex-soldier patients?

Dr. WHITE. I don't remember who first introduced him to me. He may have introduced himself. I don't recall.

Mr. WALLACE. How many of these petitions have you executed?

Dr. WHITE. I don't know, sir; the records would show that; I couldn't tell you.

Mr. WALLACE. Have you a record on the books of the hospital of these transactions with Doctor Fenning?

Dr. WHITE. The court records, I presume, would show that much better. We only keep a record of who the guardian is in a particular case.

Mr. WALLACE. I have here the transcript of the record in one case, that of Philip Thomas, alleged lunatic.

The CHAIRMAN. That is the one that Mr. Hay asked you about yesterday.

Mr. WALLACE. Doctor, it appears here that this man; in order to get his pay of \$224, it cost him \$87.

Dr. WHITE. Certainly; I presume that is so, sir.

Mr. WALLACE. To get his \$224, it cost \$87?

Dr. WHITE. Yes, sir.

The CHAIRMAN. Those very questions, I think, were gone into yesterday, Mr. Wallace.

Mr. WALLACE. I ask that this transcript of the record in the case of Philip Thomas be copied into the proceedings.

The paper referred to is as follows:

[Filed February 13, 1905; J. R. Young, clerk.]

In the supreme court of the District of Columbia, holding an equity court.

In re PHILIP THOMAS, ALLEGED LUNATIC. Lunacy No. 1900.

The petition of William A. White, respectfully represents:

1. That he is a citizen of the United States and is the superintendent of the Government Hospital for the Insane, Washington, D. C.

2. That Philip Thomas, late a private, Troop K, Tenth United States Cavalry, was admitted to said hospital by order of the Secretary of War December, 9, 1883, since which date he has been confined in said institution.

3. That said Philip Thomas is entitled to arrears of pay from the United States amounting to about \$225, and to no other property known to your petitioner; and that he is borne on the records of said hospital as unmarried and that so far as is known at said hospital he has no relatives or friends in this jurisdiction.

4. That for the purpose of collecting said arrears of pay and using the same for the welfare of said Philip Thomas it is necessary that a committee be appointed.

Wherefore, the premises considered, your petitioner asks:

1. That a writ de lunatico inquirendo be issued by this honorable court.

2. That a committee of the person and estate of said Philip Thomas be appointed under such bond as the court shall deem proper, and the petitioner suggests that Frederick A. Fenning, a member of the bar of the supreme court of the District of Columbia, who is experienced in fiduciary matters, has expressed his willingness to act as such committee.

3. And for such other and further relief as to the court may deem meet.

WM. A. WHITE.

DISTRICT OF COLUMBIA, ss:

I do solemnly swear that I have read the petition by me subscribed, and know the contents thereof, and that the facts therein stated upon information and belief I believe to be true and that the facts therein stated upon my personal knowledge are true.

WM. A. WHITE.

Subscribed and sworn to before me this 10th day of February, 1905.

[SEAL.]

A true copy. Test:

FRANK M. FINOTTI, Notary Public.

J. R. YOUNG, Clerk,
By W. E. WILLIAMS, Assistant Clerk.

Filed February 13, 1905.

J. R. YOUNG, Clerk.

In the supreme court of the District of Columbia, holding an equity court.

In re PHILIP THOMAS, ALLEGED LUNATIC. Lunacy No. 1900.

We, John E. Toner and A. C. Fitch, do solemnly swear that we are acquainted with said Philip Thomas who was admitted to the Government Hospital for the Insane on December 9 1883, and is still confined in said institution, and that, in our opinion, he is of unsound mind, wholly unable to care for himself or his property.

JOHN E. TONER, M. D.
A. C. FITCH, M. D.

Subscribed and sworn to before me this 11th day of February, 1905.

[SEAL.]

FRANK M. FINOTTI, *Notary Public.*

Filed January 22, 1905.

J. R. YOUNG, *Clerk.*

In the supreme court of the District of Columbia, holding an equity court.

In re PHILIP THOMAS, LUNATIC. Lunacy No. 1900.

First and final account of Frederick A. Fenning, committee.

RECEIPTS.

March 17, 1905, arrears of army pay	\$224. 09
October 2, 1905, interest savings bank	2. 10
	<hr/>
	226. 19

EXPENDITURES.

March 18, 1905, Government Hospital for the Insane, personal use of ward, voucher 1	25. 00
March 18, 1905, Dr. Nevitt, examination and testimony, voucher 2	10. 00
March 18, 1905, clerk of court	10. 00
March 18, 1905, marshal's fee, voucher 3	1. 50
March 18, 1905, counsel fee, voucher 4	25. 00
Notarial fees, vouchers 5 and 6	1. 00
June 12, 1905, Dr. Toner, examination and testimony, voucher 7	10. 00
December 23, 1905, clothing, voucher 8	4. 75
	<hr/>
	87. 25
Balance on hand	138. 94

The committee respectfully informs the court that immediately upon his appointment in this case he filed an application for the arrears of army pay due the ward, which claim was favorably acted on by the Treasury Department and provision was made for its payment in the general deficiency bill of 1905. This claim was filed and prosecuted by the committee in person and in this connection attention is called to the fact that the usual fee charged by attorneys for presenting these claims is from 5 per cent to 10 per cent. The committee has frequently visited his ward and has seen that he was supplied with articles for his personal comfort.

For his services the committee asks that he be allowed a commission of 10 per cent, amounting to \$22.61, this to include \$5 paid for fiduciary bond.

There being no further need for the services of the committee in this case, it is suggested that after deducting the above commission and deducting the costs of the clerk's office, the committee be authorized to pay the remainder to the superintendent of the Government Hospital for the personal use of the ward and his burial expenses should he die while a patient at that institution, and that upon filing the superintendent's receipt in this cause the committee be discharged from further service.

FREDK. A. FENNING.

DISTRICT OF COLUMBIA, ss:

Subscribed and sworn to before me this 22d day of January, 1906.

J. R. YOUNG, *Clerk, etc.,*
By R. J. MEIGS, Jr., *Assistant Clerk.*

Voucher 2.

WASHINGTON, D. C., March 3, 1905.

Mr. F. A. FENNING,
(Committee for) Philip Thomas (colored).

To J. RAMSAY NEVITT, M. D., Dr.

[Office: 225 4½ street NW.; hours: 12 to 1 p. m.; 4 to 5 p. m. Residence, 1820 Cincinnati street; hours:
8 to 10 a. m.; 5.30 to 7 p. m.]

To professional services rendered to date:

Examination and court..... \$10.00

Received payment.

J. RAMSAY NEVITT, M. D.

Telephone North 236. Ex. 2/14/05.

Voucher 4.

WASHINGTON, D. C., Mch. 18, 1905.

Received of F. H. Fenning, committee, twenty-five dollars, counsel fee lunacy case
Philip Thomas, lun., 1900.
\$25.

F. G. COLDREN.

Voucher 7.

MARCH 24, 1905.

F. H. FENNING—dr. J. E. TONER, M. D.

To medical testimony given in the case of Philip Thomas, \$10.00.

Received payment,

J. E. TONER, M. D.

Please accept thanks.

J. E. TONER.

Mr. WALLACE. Did you employ Mr. Fenning and his law partner, Mr. Coldren, or either of them, to act as your counsel in these applications made in court in these cases, and agree that they should charge fees for preparing your petition?

Dr. WHITE. I never had any such agreement.

Mr. WALLACE. Did you ever have any conversation or understanding with Mr. Fenning, relative to your assistant physicians, or any of your official staff, getting fees for testifying in court in these cases?

Dr. WHITE. A long time ago, I judge it was in the neighborhood of two years ago, Mr. Fenning came to me and asked me whether, when proceedings were instituted for the appointment of a guardian, and proceedings de lunatico inquirendo had to be had, and it was necessary for one of the members of the staff to testify in that case, I would have any objection to his being allowed a reasonable fee, in the same way that a physician who would be called in from outside would be allowed a reasonable fee.

I thought the matter over, and I told Mr. Fenning that if he would present that matter in full to the court, and the court passed upon it favorably, I would not offer any objection. He did that. The court gave the matter very careful consideration. I think the court had the first case under consideration for a considerable time, and finally passed favorably upon it, allowing the fee; and that action of the court in that first case—I don't remember the name of the case—has been a precedent for the subsequent actions.

Mr. WALLACE. Did you have any knowledge of the fact that Doctor Nichols, Doctor Toner, Doctor Hummer, and others of your

official staff, were getting fees of \$10 or more out of these ex-soldier's pension or other funds for testifying in these Fenning cases?

Dr. WHITE. I had knowledge that they were getting a fee of \$10, I think never more, which was allowed by the court after this proceeding I have just detailed.

Mr. WALLACE. You approved of the payment of those fees to them, did you?

Dr. WHITE. I have just told all there is to tell about that, that I did not object if the court was willing.

Mr. WALLACE. Did you have any correspondence with the War Department, or the Auditor of the War Department, by letter or telephone, relative to the money due this soldier, before preparing and executing your petition in the case?

Dr. WHITE. Which soldier?

Mr. WALLACE. This Thomas.

Dr. WHITE. I don't know, sir. I don't remember the case.

Mr. WALLACE. Or any soldier. Did you have any such correspondence or get any such information from official sources in all or any of the other cases in which you petitioned for the appointment of Mr. Fenning as committee for these ex-soldier patients?

Dr. WHITE. I don't remember that I did have. I don't know whether I did or not.

Mr. WALLACE. In these cases did you first get the information that the money was due these patients and then communicate the facts to Coldren and Fenning, or Mr. Fenning, and instruct them to prepare your petition, or was your petition prepared by them without your instructions, and you simply executed the same at their request without any previous knowledge of the facts?

Dr. WHITE. That matter, to a certain extent, was delegated to my staff officers. They understood that where cases came up, and it was desirable for any reason that a guardian should be appointed, it was proper to have such a petition prepared, and I have never seen any petition that did not come to me properly initialed by the staff officer. I have had very thorough understanding with the different members of the staff, and with Mr. Fenning himself, as to the character of cases in which guardianship proceedings should be instituted.

Mr. WALLACE. Please state what special advantage or benefit any of this character of cases, such as that of Philip Thomas, secured by the collection and expenditure of these claims.

Dr. WHITE. They secured the advantage of getting their money, which they could not get in any other way.

Mr. WALLACE. Were they not entitled to all the care, clothing, food, etc., that they needed at the hospital without this money?

Dr. WHITE. They would have gotten their maintenance, irrespective of it, certainly.

Mr. WALLACE. For the purpose of preparing these petitions in lunacy, does Mr. Fenning or Mr. Coldren have free access to the hospital records of these cases and their army papers?

Dr. WHITE. I think so.

Mr. WALLACE. Did not the outside physicians selected by Mr. Fenning have unquestioned privilege of examining these patients whenever they called?

Dr. WHITE. I think so.

Mr. WALLACE. Were these privileges equally afforded to other attorneys and physicians who called in the interest of their soldier patients?

Dr. WHITE. We accorded those privileges, within reason, to anybody whom we are satisfied is interested in the welfare of the patients.

Mr. WALLACE. Have you ever refused any?

Dr. WHITE. Yes, sir.

Mr. WALLACE. Do you know of any case where Mr. Fenning has removed the patient from the hospital after being appointed? If so, give the name and particulars.

Dr. WHITE. I think he has, but I can't give the particulars.

Mr. WALLACE. Do you remember the case of George Bastin, and will you say that his mental condition was such that he could not execute vouchers at the time Mr. Fenning was appointed?

Dr. WHITE. I know Mr. Bastin, but I can't answer that question, because I don't recollect when Mr. Fenning was appointed, or what his condition was at that time, from my personal recollection.

Mr. WALLACE. Do you recollect the name of William J. Logue, whom you certified was sane after he commenced habeas corpus proceedings?

Dr. WHITE. Yes, sir.

Mr. WALLACE. And from whom you have claimed over \$200 back board money since his discharge from the hospital?

Dr. WHITE. I remember something about the case.

Mr. WALLACE. Did you make this claim for back board money of your own volition, or was it suggested to you by Mr. Fenning, who had been appointed this ex-soldier's committee?

Dr. WHITE. It was merely a claim made by the hospital in accordance, as I recollect, with the judge's order in the case when the guardian was appointed. It was merely an adjusting of the claim in accordance with the orders of the court on file at the time, as I recollect.

Mr. WALLACE. In these petitions in lunacy made by you in these ex-soldier cases, did you first examine into and ascertain the facts and then notify Mr. Fenning or Mr. Coldren to prepare the papers?

Dr. WHITE. Only by proxy, through one of my medical staff.

Mr. WALLACE. Or did the suggestion first come from Mr. Fenning or Mr. Coldren?

Dr. WHITE. It came through the medical staff.

Mr. WALLACE. Did Dr. Hummer or any other member of the hospital staff have anything to do with getting these facts as to money being due these ex-soldiers from the Government?

Dr. WHITE. I think perhaps they did, but I am not certain as to just how much knowledge they may have individually had.

Mr. WALLACE. You think they had knowledge, but you do not know what it was?

Dr. WHITE. I can not answer that definitely. They must have had knowledge that there was pay due them, of course, but whether they knew exactly how much it was or not, I don't know. I presume they did. That appeared as set forth in the petition, I believe, in each case.

Mr. WALLACE. Have you any knowledge of any payments of commission or compensation in any of these Fenning cases being

made to any employee or any other person in the hospital service, other than these fees paid the doctors for testifying?

Dr. WHITE. I do not recall any such instance.

Mr. WALLACE. You have a full knowledge of the various wards in the different buildings, have you not?

Dr. WHITE. I have a pretty comprehensive knowledge of them—all of them.

Mr. WALLACE. How many patients and attendants have you on Maple ward?

Dr. WHITE. I think there are two, but I am not certain. I can not give you that information about every ward. My memory would not serve me.

Mr. HAY. He asked for patients and attendants.

Dr. WHITE. There are about two attendants, and I can not tell you definitely, but I think there are not over ten or a dozen patients on that ward.

Mr. WALLACE. What is the character, as to violence or sickness, of these patients?

Dr. WHITE. They all belong to the better class of patients. The doors of the ward are open. They have ingress and egress at their own will, and they are essentially, all of them, gentlemen. Many of them have been, from time to time, commissioned officers. They are people of that type.

Mr. WALLACE. Is it not true that the food furnished to patients on these wards is much better than that supplied to the patients in Garfield, Dawes, and Atkins Hall?

Dr. WHITE. They have a special diet on that ward; yes, sir.

Mr. WALLACE. Why is the distinction made, Doctor?

Dr. WHITE. Largely because the ward is intended, in the main, for commissioned officers, and commissioned officers pay the hospital a dollar a day, I think it is, for their maintenance, in the same way exactly that commissioned officers pay when they are being treated in army hospitals.

Mr. SMYSER. How is that?

Dr. WHITE. The commissioned officers over there, while they are getting their pay from the department, pay the hospital. It is the custom for them to pay a dollar a day, which I think is the same arrangement that is made for the commissioned officers when they have quarters in army hospitals.

Mr. WALLACE. Do the same conditions obtain in Sycamore Ward?

Dr. WHITE. Why, similar.

Mr. WALLACE. How many criminals or persons charged with crime are there on these three wards—Maple, Poplar, and Sycamore?

Dr. WHITE. I can't tell you. I don't recall.

Mr. WALLACE. In addition to Dr. Hagner, are not Lieut. Wilson, charged with being a defaulter, and Lieut. Hamilton, charged with embezzlement, patients on Maple Ward?

Dr. WHITE. I don't remember the case of Lieut. Wilson. I do know all about Lieutenant Hamilton. Lieutenant Hamilton was confined here in the District jail on a criminal charge, and I was requested by the district attorney to see him. I made a report, upon my examination, that in my opinion he was insane and irresponsible, that he was in fact probably recovering from an attack of

insanity when I saw him, and I think the case was nolle prossed. That is my recollection of it. So that he is not a criminal. He never has been convicted of crime, and I think the charges against him were nolle prossed.

Mr. WALLACE. That is Lieutenant Wilson?

Dr. WHITE. That is Lieutenant Hamilton. Dr. Robbins informs me—and my recollection does not serve me—that he was tried and found not guilty because of insanity. That is a form of verdict which I think has recently come into use in the District here—not guilty because of insanity. So that he is not a criminal.

Mr. WALLACE. That is the information you have from Dr. Robbins?

Dr. WHITE. Yes; he refreshed my memory, and I believe that is so.

Mr. WALLACE. Has not Lieutenant Leshar, a patient on Maple ward, gotten married since his commitment, and is he not permitted to remain away from the hospital frequently with his wife?

Dr. WHITE. Yes, sir; but he is a commissioned officer of the Army and is under orders from the War Department. Everything that is done with Lieutenant Leshar is done with the full knowledge of the War Department and with their consent. He is under orders from the War Department to be at the hospital. He is there under their orders.

Mr. WALLACE. Lieutenant Hamilton is now working in the store-room as bookkeeper, or something of that sort, is he not?

Dr. WHITE. Yes; he does some clerical work in the storeroom.

Mr. WALLACE. What compensation does he get?

Dr. WHITE. He doesn't get any. I am quite sure he doesn't get any. I wouldn't want to swear to it, but I am almost positive he doesn't get any.

Mr. WALLACE. Is there a patient named Warren Wright in Poplar Ward who is under criminal charges?

Dr. WHITE. I don't know, sir. I don't know the patient.

Mr. WALLACE. What other patients are there on this ward who are under criminal charges?

Dr. WHITE. I can't answer that. My recollection does not serve me.

Mr. WALLACE. Is there not a patient on Sycamore Ward named Alfred German, and is he not a bank defaulter, or something of that sort?

Dr. WHITE. We have a patient in the hospital by the name of German. It is a very complicated case. He was tried as a bank defaulter and convicted. His case was appealed and a new trial was ordered. In the interval between his conviction and the ordering of a new trial, the subject of his mental condition came under consideration, and it was passed upon by a jury, and he was sent to the hospital as insane. I am in correspondence now with the Department of Justice and the United States district attorney—I think it is in one of the southern States; I think he came from Louisville—with regard to the disposition of that case and with regard particularly to my opinion as to his mental condition, with a view to the possible nolle prossing of the proceedings against him.

Mr. WALLACE. Is he still with you, Doctor?

Dr. WHITE. Yes, sir.

Mr. WALLACE. Does he take drives out with his wife?

Dr. WHITE. He has been permitted to go out with his wife from time to time, and the Department of Justice has been fully informed with regard to the liberties that have been allowed him.

Mr. WALLACE. Was there not a criminal named Hall recently transferred from Howard Hall to Sycamore Ward?

Dr. WHITE. There was a young man by the name of Hall who is charged with forgery in the District. I saw Hall at the instance of the district attorney while his case was on trial, and I testified that the boy was insane, and he was found not guilty because of insanity.

Mr. WALLACE. Were not two marines, noncriminals, recently placed in Howard Hall as punishment or discipline for getting into a row with each other?

Dr. WHITE. I don't know, sir.

Mr. WALLACE. How many noncriminals are there now in Howard Hall, which is the criminal building?

Dr. WHITE. I presume there are 30 people in that building who are not convicted of crime, but who are there because they have vicious or criminal tendencies. Our classification of the patients is a classification based upon——

Mr. WALLACE. That is, the criminal insane?

Dr. WHITE. It is a classification based upon the characteristics of the man. Whether he comes within the purview of the criminal law is often a purely accidental thing. He may be essentially criminal in his tendencies and have been found insane without ever having had a charge preferred against him.

He may be essentially and generally noncriminal in his tendencies, and under the visitation of insanity has committed what would otherwise have been a crime, and come to us in that way. Our classification is based only on the individual characteristics of the individual rather than upon any artificial designation which he may have acquired by virtue of having been convicted or not been convicted of crime.

Mr. WALLACE. Please explain why you have two attendants each on Maple and Poplar wards, where the patients are orderly and convalescent, and only about six on each ward, and require but little attention; and yet only have the same number of attendants on each of the wards in R Building, where there are about 36 patients in each ward, and they are for the most part bedridden and troublesome, and require a great deal of individual attention?

Dr. WHITE. Well, we have the number of attendants in each ward that we think are necessary. Two is practically a minimum number for any ward. No matter if you have but three patients you have practically to have two attendants, no matter what the character of the patients is, because one of those attendants is frequently off on leave, and somebody else has to take charge in his absence, and that somebody else ought to know the work of the ward and the personnel of the patients. So we practically always have two. If you have but one patient in the institution you would have to have two attendants.

The CHAIRMAN. When you speak of two attendants being necessary in each ward, you mean besides the night attendant, do you not?

Dr. WHITE. Yes, sir.

Mr. WALLACE. Could there be a better distribution of the attendants and nurses than that, do you think?

Dr. WHITE. I think we have distributed them to the best advantage. As far as lies in our knowledge and ability in all cases we try to do the best we can.

Mr. WALLACE. And for the best advantage of the patients?

Dr. WHITE. Yes. We do not consider we are perfect. We have not done everything that might possibly have been done, but we do the best we can.

Mr. WALLACE. Can you tell us how much of the time you were absent from the hospital during the year 1905?

Dr. WHITE. I can not; but very little.

Mr. WALLACE. Do you have thirty days' leave and thirty days' sick leave? Is that the custom?

Dr. WHITE. I presume the law entitles me to that, but I never have taken it. I never have taken a day's sick leave, and I never have taken my thirty days' annual leave yet.

Mr. WALLACE. You never take it by installments, either?

Dr. WHITE. I have been away from the institution from time to time, in many instances possibly on business of the institution; and sometimes I run away over Sunday, because the only way I can get a minute's rest is to go away from the institution. Sometimes I need it and occasionally I take it; but it is always taken with the knowledge of the Department.

Mr. WALLACE. Something has been said about your being out late in automobiles. Was that on the business of the institution, or just on your own business?

Dr. WHITE. I am out late just like anybody else is sometimes. Sometimes it is a personal matter. Sometimes it is attending medical societies, and there are various reasons, which any man would naturally have for staying out in the evening.

Mr. WALLACE. It has been testified by Dr. Stack, I believe, that under a recent order made by you the strait-jackets were generally removed from the wards. Was not this order issued on February 21, just after the publication of the Medico-Legal Society report?

Dr. WHITE. I don't know exactly what Dr. Stack referred to there, but I never issued any order because of any publication of the Medico-Legal Society or any other person or persons. I go right on running the institution as I think it ought to be run, irrespective of anything anybody says.

Mr. WALLACE. Miss Herbert testified that on May 11, 1906, you made an order that domestics and dining-room girls should help the attendants on the wards after they were through with their domestic duties. This is true, is it not?

Dr. WHITE. I think it is.

Mr. WALLACE. Then prior to May 11 these domestics did not help on the wards?

Dr. WHITE. I don't know anything about the dates, but as I explained before this committee, I think, yesterday, my idea was to get a better class of domestics who could properly be promoted to the position of attendant, and it was proper for them to begin some of their attendant duties in that way, so that when they became applicants for promotion they could be considered for that advance.

Mr. WALLACE. Do you remember whether you ordered them off about that time, about February 21?

Dr. WHITE. Ordered what?

Mr. WALLACE. These strait-jackets off of patients.

Dr. WHITE. I have had considerable consultation with my staff in regard to matters of restraint from time to time. I don't recall any specific order. There is no written order to that effect, but I think I see almost everyone of my staff everyday, and I know that my staff knows that I discourage, as far as possible, and always have, the use of mechanical restraints except in selected cases where it can not be avoided.

Mr. WALLACE. There has been testimony here, Doctor, showing the scarcity of sugar in the different wards for about six months prior to a week or so ago. What was the occasion for this economy, if it occurred?

Dr. WHITE. Well, the dietary is a big question. My method of running the dietary is not in any way to limit the variety of food nor the quantity which is necessary; but all the instructions which I have given have been uniformly toward limiting waste. Some two or three years ago we had a very detailed investigation into the dietary of the hospital by experts in food matters. As the result of that investigation we found very high percentages of waste in many articles, and all my efforts have been toward reducing waste to a minimum. I know now that we use more sugar in our institution than they do—I think I am absolutely correct in saying this—in Manhattan State Hospital, where they have eighteen hundred more patients than we have. So that I do not think that we can be considered to be using too little. Perhaps some of the people have not quite as free access to the sugar barrel as they have had, but I don't think we can give every one of them free access to everything in the institution unlimitedly.

Mr. WALLACE. There is change of sweet teeth from time to time? Sometimes they need more sugar than at others?

Dr. WHITE. Perhaps so; but our effort at the institution has been to establish a per capita ration as near as possible, so that everybody on the same diet shall get essentially the same per capita allowance; and we expect our people who prepare the food to be able to do with that per capita allowance, which we know to be ample when we prescribe it.

Mr. SMYSER. In other words, you can not segregate the sweet tooth people?

Dr. WHITE. Not very well.

Mr. WALLACE. It has been testified by Mr. Hayden, I believe, that there was a deficiency in your accounts in 1904-5.

Dr. WHITE. Was there a deficiency for the year?

Mr. WALLACE. Yes; something was published in the papers about that time.

Dr. WHITE. The paper said there was \$30,000 deficiency at the beginning of the year. That was a matter of bookkeeping. We did not have any deficiency and I did not ask any appropriation for a deficiency for the fiscal year 1905. There was no deficiency in that year.

Mr. WALLACE. There was actually no deficiency?

Dr. WHITE. There was no deficiency and no item in the deficiency bill for the support of the hospital for the year 1904-5.

Mr. WALLACE. You did not ask the Government for any appropriation?

Dr. WHITE. No, sir.

Mr. HAY. If you will excuse me a moment, Heyden said you cut down the force.

Dr. WHITE. Yes, I did. We appeared to be running behind at that time. That is, I was afraid if we kept up the expenditures as we had started, we would have a deficiency, so I took means to eliminate the possibility. I took the position when I came here that if Congress gave me what I asked for, I thought good administration under those circumstances meant no deficiencies, and it has been my object to run the hospital without deficiencies. I did not have a deficiency that year.

Mr. HAY. He said the force was cut down on that ground, and never had been increased since.

Dr. WHITE. Mr. Hay, this is the way a force grows in an institution of that sort. From time to time different heads of the departments will come to me and say "We need a man for this, that or the other purpose." It will appear to me that that is a good reason. I will say "All right; go to the civil-service clerk and make arrangements to have such a man put on that duty." Now, when the necessity for that employee ceases, the head of the department does not very often come to me and say so. Consequently there is a gradual tendency to increase the employees' staff, and perennially it becomes necessary to look over things and bring up the heads of the departments and question them stringently about the duties of each person, and lay off somebody. That is necessary almost always, I think, in large institutions where a great many people are employed; in other words, to review the whole situation from time to time and keep the force down where it belongs.

Mr. WALLACE. Doctor, I believe you stated something about \$30,000 loss on the farm, did you not?

Dr. WHITE. Somebody else did.

Mr. WALLACE. Perhaps somebody else did. Let me ask this question: Did Doctor Richardson, in his report for 1901, recommend abandoning general farming?

Dr. WHITE. I don't know, sir.

Mr. WALLACE. You do not know whether he recommended the use of the farm opposite Alexandria or not?

Dr. WHITE. I don't know, sir.

Mr. WALLACE. For grazing and raising food for the stock, etc.?

Dr. WHITE. No, sir.

Mr. WALLACE. Were not the cow barns and stables renovated and almost rebuilt by Doctor Richardson before you came in?

Dr. WHITE. Doctor Richardson built a stable. He may have done something to one of the cow barns. I don't think he did to the other. One of the cow barns is very, very old. It dates way back to somewhere about the seventies, is in a miserable condition of repair, and requires constant repair all the while. The other one dates somewhere in the eighties. Whether Doctor Richardson did anything material to that or not, I am not prepared to state. I don't know whether he did or not.

Mr. WALLACE. Have you any idea what those barns cost?

Dr. WHITE. No, sir.

Mr. WALLACE. To put up originally?

Dr. WHITE. No, sir; I don't know.

Mr. WALLACE I believe you ask a \$50,000 appropriation for the repair of them, do you?

Dr. WHITE. Not for the repair of them. I asked for approximately that amount for building entirely new barns.

Mr. WALLACE. Would that or would it not be more than the cost of these barns you have?

Dr. WHITE. I don't know what these barns cost. I think they were built very cheaply; but if we were to build a barn to-day they undoubtedly would cost more than those barns cost, because in the first place the cost of construction of every kind has increased very materially since those barns were put up.

Further than that, the method of constructing barns along modern hygienic and sanitary lines is very different from what it was then, and does involve considerable additional expense. Of course I made an estimate to build barns the way they ought to be built, and made what I presumed and what I now presume to have been fair estimates.

Mr. WALLACE. Your idea then was to build new barns?

Dr. WHITE. Yes, sir.

Mr. WALLACE. Out and out?

Dr. WHITE. Yes, sir.

The CHAIRMAN. Did the Committee on Appropriations approve of that?

Dr. WHITE. I don't know. I have not seen the appropriation bill. I think personally they believed it was a desirable thing. Whether the exercise of their function in allowing moneys to the different Departments they have permitted it or not, I don't know.

Mr. WALLACE. In governing your expenditures do you pro rate your appropriation so as to provide a specific per capita cost for the various needs of the patients, or do you expend your money haphazardly without due calculation or anything like that?

Dr. WHITE. I don't think I do anything haphazardly. I try not to. I try to do everything after very careful consideration, and in fact all the consideration which the necessity of the case demands and warrants.

Mr. WALLACE. Then you provide for a specific per capita?

Dr. WHITE. Our nominal per capita is \$220 a year. We expect to run our institution on that per capita.

Mr. WALLACE. For instance, how much do you allow for clothing for each patient?

Dr. WHITE. I can't answer that specifically. Perhaps I can if you will wait a moment. Our clothing costs us per capita approximately \$11.33.

Mr. WALLACE. Medicines?

Dr. WHITE. \$2.66.

Mr. WALLACE. Food supplies.

Dr. WHITE. Food alone costs about \$100 per capita.

Mr. WALLACE. Do your books show that prorating, Doctor?

Dr. WHITE. Yes, sir.

Mr. WALLACE. Have any cases of immoral conduct between male and female patients or attendants come to your attention out there?

Dr. WHITE. Once in a while some such thing comes up. That is natural in a big community of that sort. I do not know of any possible way of avoiding it where so many people are congregated together. It can only be reduced to a minimum.

Mr. WALLACE. Do you refer to cases among patients and attendants?

Dr. WHITE. As between patients and attendants, no such thing has ever come to my knowledge.

Mr. WALLACE. As between patients.

Dr. WHITE. I think I have one or two instances in mind.

Mr. WALLACE. Could you state what that was, Doctor?

Dr. WHITE. Yes; I believe that two negro patients in one instance were found in flagrante delicto, or something of that sort.

Mr. WALLACE. Were they disciplined in any way, Doctor?

Dr. WHITE. Merely their liberties were taken away from them so as to prevent the possibility of a recurrence.

Mr. WALLACE. Now, between attendants or employees.

Dr. WHITE. I have reason to believe in one or two instances some such thing, and where my reason was sufficient, in one case, I let a young woman go whom I thought was exercising not a very beneficial influence upon her associates. In one instance a rather serious charge was made against an employee, which, however, I could not by any possibility verify, and I worked very hard on the case. I don't know what the facts of the case were. I investigated it as fully as I could, and couldn't find anything. It just devolved upon the stories of the two people. One told one story and the other another story, and I could not find any collateral evidence that enabled me to reach a conclusion.

Mr. WALLACE. You say such things will happen, but you reduce it to a minimum the best you can?

Dr. WHITE. Yes, sir; they happen occasionally in almost every big institution. It has happened in a number of institutions I have known.

Mr. WALLACE. Such a case would be reported to you, would it not?

Dr. WHITE. Yes; I don't think anybody would dare to keep such a case from me.

Mr. WALLACE. I believe you just said you discharged an employee.

Dr. WHITE. I don't remember whether I discharged her or permitted her to resign. I should be very loath to put the stigma of discharge upon a person. Under those circumstances I would not want to do anything unless I was absolutely certain in my own mind, and I would not want to do anything that would interfere with her changing around and behaving herself if she had done anything wrong.

Mr. WALLACE. At the same time you suspended a male employee, did you?

Dr. WHITE. I think probably that is the case I refer to. I suspended him indefinitely until I investigated the charges, and not being able to substantiate them, I let him come back to duty.

Mr. WALLACE. Did you subsequently return him to duty?

Dr. WHITE. Yes, sir; because I couldn't substantiate the charge after the most rigorous investigation I knew how to give the matter.

Mr. WALLACE. How did he conduct himself afterwards?

Dr. WHITE. He was an old employee in the hospital. He has been there twenty or twenty-five years, and he never had had a single solitary thing against him up to that time, and he never has had since.

Mr. WALLACE. Do you know of any case, or are there cases now in the hospital where a female patient is in trouble through contact with a male patient?

Dr. WHITE. No, sir.

Mr. WALLACE. If those cases occur, is there any particular one to blame for it, or who would be to blame—I mean in official responsibility?

Dr. WHITE. I don't believe so. A great many of our patients are on parole, and they have liberty of the grounds. Such things occasionally will happen in the best regulated families.

Mr. WALLACE. Doctor, the testimony appears to show that you give very little, if any, supervision to the kitchen and dining-room service, or to any of the wards, with the exception of the receiving ward, where it is necessary for you to see new patients and pronounce upon their mental condition. Do you consider it safe and proper to leave such important matters entirely to your subordinates?

Dr. WHITE. I don't leave it entirely to my subordinates, and I do give the matter a certain amount of attention, such attention as I think is necessary.

Mr. WALLACE. What methods have you instituted for the recreation and employment of the old soldiers in the so-called bull pen?

Dr. WHITE. I discount that term "bull pen" very emphatically. It is an atrocious name for a very beautiful part of the grounds.

Mr. WALLACE. That comes out of the mouths of witnesses.

Dr. WHITE. I don't permit its use on the grounds. I don't permit the use of that term at all.

Mr. SMYSER. There have been no statements of witnesses about that as a bull pen, as I recall it.

Mr. WALLACE. I think so.

Mr. SMYSER. I do not so recall it. Some witness said, I think, he did not know of such an institution out there, but it has got that name somehow or other.

Mr. WALLACE. At any rate, Doctor, you know what I mean?

Dr. WHITE. I know what portion of the grounds you mean.

Mr. WALLACE. I am under the impression that some of the witnesses or somebody here spoke about it as the bull pen, but that is what I mean. What do you do to make life pleasant and interesting for them at that place?

Dr. WHITE. Our regulations of amusements are these: We have, one night in every week, a dance for the patients, and patients from all over the institution, including this part, go to that dance. That is during the winter. We also have one night in the week for theatrical entertainments. There are two evening entertainments every week. During the summer season we have two afternoon band concerts every week. Those are the regulation amusements. Then we have two large carryalls, which make each two trips a day, taking patients out driving, and they have a regular itinerary, going from one apartment to the other, so as to get as many patients as we can out driving in that way.

Mr. WALLACE. Have you any methods of treatment for mental troubles other than confinement and restraint, and regular hours of food and sleep? If so, please explain your methods fully.

Dr. WHITE. I can not explain the whole science of psychiatry very well, but of course the treatment of mental diseases very often resolves itself into the treatment of bodily ills which the patient suffers, and they are treated along general lines of medicine. Mental disease is bodily disease, and is treated along general medical principles.

Mr. WALLACE. Are stimulants sometimes given?

Dr. WHITE. It depends on the individual case. Every case is treated according to what it may present for treatment. There are no two alike. Of course there is no such thing as treating a delusion by a pill, you know.

Mr. WALLACE. You wrote a letter to the president of the board of visitors, stating that Mr. Thornton Pyles was unfit for further employment at the hospital, did you?

Dr. WHITE. I think I did.

Mr. WALLACE. And then immediately discharged him?

Dr. WHITE. I took steps to have him leave the reservation.

Mr. WALLACE. Explain why you did not take that action before the filing of the "Pyles petition," which was about to be investigated by the board of visitors when you discharged Mr. Pyles?

Dr. WHITE. I don't know that I can explain that absolutely, except that Mr. Pyles's conduct in my estimation was due, in large part, at least, to the fact that in my opinion he was mentally deranged. I did not take the same active steps toward him that I would have taken if I had not believed that to be so. I took the attitude toward him that I take toward anybody I believe to be mentally deranged.

I believe a person can not be treated with consideration in an institution of that sort who is mentally deranged. I don't know where he could be. I got him out of the place in the best and the most practical way I could and as soon as I could under all the circumstances of the case, for the best interests of the institution and also for his best interests.

Mr. WALLACE. Are all of the epileptics now separated from other patients?

Dr. WHITE. All of them except the colored. There are a few colored epileptics that are not segregated. You understand, the problem of segregation in our institution is particularly difficult, because we first have to divide them into male and female and then into black and white, and the difference between dividing into two sections and into four is not a difference of twice as much. It increases in difficulty by geometrical ratio. I have succeeded in segregating the great majority of epileptics—all the white women and the white men, and that is true of the vast majority of them. There are a few colored epileptics who are still with the other colored patients.

The CHAIRMAN. Doctor, just in that connection, if Mr. Wallace will allow me—

Mr. WALLACE. Certainly.

The CHAIRMAN. The fact of having to divide into four classes—that is, male and female and black and white—would add to the per capita expense of an institution also, would it not?

Dr. WHITE. I don't know. It might or it might not. Of course we had to do our segregating with the buildings we had there, and the problem was an extremely complex and difficult one. I think probably we have done some segregating that increases the per capita.

Of course I have segregated the colored males, the tubercular patients, and we have a whole building set apart where there are only six or eight patients. The building could accommodate thirty or forty, so that of course we are losing a good deal on that segregation.

Mr. WALLACE. Mr. Chairman, before we leave this Pyles matter, I would like to have Mr. Pyles's petition incorporated in the proceedings, if it has not already been done.

Dr. WHITE. Mr. Pyles's petition is in evidence. I put it in evidence.

Mr. WALLACE. I would like to have it copied in.

The CHAIRMAN. Very well.

The paper referred to is as follows:

A TRUE STATEMENT OF AFFAIRS AT ST. ELIZABETH HOSPITAL FOR THE INSANE.

In submitting the following compiled statement of our grievances, which have accumulated with such rapidity since Dr. W. A. White assumed the management of St. Elizabeth Hospital for the Insane, we do so with truth, as well as respect, and furthermore, with a certainty and willingness to substantiate and prove its integrity.

The cloud which hangs over our future does not seem to be pierced by the sunlight of Doctor White's consideration. Shadows are deepening and darkness grows heavier over the future of our prospects.

To strengthen our position (no matter in how unfavorable light to Doctor White) we must draw a line of comparison between the régime of the late Doctor Richardson and that of the present incumbent.

The bill of fare has been entirely changed during the past year, and where we before obtained wholesome and palatable food, we now get food not palatable and exceedingly unwholesome. Old soldiers, nurses, and attendants are complaining, and are far from being satisfied, notwithstanding Doctor White to the contrary.

Unpared potatoes are put day after day before the aged and feeble soldiers, who stood side by side for the Old Flag, and who have been sent there to find peace for their tired minds and prepare for the glories of heaven. We have seen these poor men, who with palsied hands make fruitless efforts to pare these potatoes, and being baffled by their peculiar disability, take up the potato and eat skin and all. This treatment to whom all generosity should be shown, in consideration where so much is due from a grateful Government, makes the cruel punishment of the middle ages pale in its contemplation.

Then, too, many of these old men have no teeth, and on account of their inability to chew the coarse food placed before them, they go from their places at the table hungry. This seems accidental suicide by starvation on the part of those who govern this institution. The attendants and nurses complain of this daily in their ward notes to the supervisors and doctors. No change is made and the dead wagon continues to ply between the wards and the dead house.

This report is furnished by nurses and attendants who are in a position to know; and further, in a great many of the back wards where are quartered 50 per cent of the old soldier patients, a sick diet is never sent. A great many of these old soldiers could and are willing to purchase the little nourishments and delicacies so requisite to old age, but are denied them on account of their feeble condition and peculiar insanity which makes them forget their right to ask for or demand.

The Government has given most of these old men pensions by which to comfort their aged condition. But here they enjoy it not. These soldiers are hustled from the path of visitors. Their condition is, too, greater proof of the cruelty they receive.

The supply of tobacco, heretofore so generously distributed, has been greatly cut down and very few of these old soldiers are given any. The attendants have been instructed not to give any one of them tobacco who does not do a little work upon the ward. Is this a workhouse? Are men supposed to work? Heretofore they could obtain those little favors so needful to their temperament and habit.

Some of these poor old men are denied the pleasure in attending the amusement so often given to the patients in this institution on account of not having sufficient and suitable clothing. When a requisition is put in for clothes for these men, a common jean suit is sent them. When an inquiry is made why they can't be furnished decent clothing like patients in other wards, word comes back that they shall have no say in the style or quality of clothing they wear.

The scarcity of attendants and nurses upon many of the wards keep us from doing our work thorough, and thereby the patients have to be neglected on account of more urgent cases. The force of attendants should be increased and hours of labor reduced.

In substance we submit the following in our behalf:

The attendants and nurses employed at the Government Hospital for the Insane are required to labor thirteen hours of any one calendar day, on an average of twelve hours one day and fourteen the next.

When not so engaged the attendants and nurses are compelled to be in their respective wards unless excused as follows:

Unmarried attendants and nurses are excused from 6 p. m. to 10 p. m. every other night, four hours of forty-eight. In addition to this they are excused one night each week from 6 p. m. to 12 p. m.; this gives them six hours out of forty-eight.

Attendants and nurses that are married and have a family living away from the hospital are excused from 6 p. m. until 6 a. m. every other night; making twelve hours out of forty-eight.

In addition to this, attendants and nurses are allowed in any one calendar year the following time:

	Days.
Annual leave.....	15
One-half day each week.....	26
Every third Sunday.....	17
National holidays.....	2
Sick leave.....	30

They receive their sick leave in allotments of two and one-half days per month, provided they are sick in bed.

When not excused as above, the attendants and nurses are required to be in their respective wards nine hours during the night for any emergency call, such as restraining some violent patient, to look for some patient who is trying or has escaped, to bathe a number of patients that may arrive during the night, and in case of fire, etc.

The attendants and nurses have thirteen hours of toil of the most tedious kind. The many kinds of work they have to perform are too numerous to mention in detail. But to care for thirty or forty irresponsible people who are insane, and only two to four attendants or nurses to care for said number of patients, it would be supposed that they spend very few idle moments in their thirteen-hour day.

After that long day, they are required to retire for the night in their rooms on the same wards with the insane patients, subject to an emergency call, and also listen to the moaning, muttering, shrieks, and tattoo beat on the doors by the unfortunate patients who are placed in their care. The night's rest of the attendants and nurses is frequently disturbed, and as a result their mental and physical strength is endangered.

Attendants and nurses are required to purchase and wear uniforms while on duty, and said uniforms are furnished out of their monthly earnings. These uniforms cost from \$3 to \$15, and are often pulled and torn to pieces by violent patients.

Also, the attendants and nurses have been known to pay the sum of \$5 for patients who escape from them while on duty, both inside and out.

So it can readily be seen that we have a very little time off duty and a very little money. The scale of wages range anywhere from \$14 to \$37.50 per month, with board, which is of very poor quality, etc.

The newly employed attendants should be placed upon a special ward set aside as a training ward, as much of our time is taken up in initiating them as is by the care of the patients. It is imperative that a new attendant should be instructed as to his unfamiliar duties, thereby the patients are neglected.

Is it not an injustice to attendants, nurses, or patients that new men be put on the wards where so many patients are to be constantly cared for? To properly handle, and with successful results, the men who are under our keeping, and attendant must be thoroughly familiar with their peculiar eccentricities.

Is it a potent factor in the solicitation of increase pay. If our pay was increased instead of decreased better and able men would be invited to seek employment and the efficiency of the service would thereby be assured.

We give you below the scale of wages promulgated by Dr. Richardson, one submitted to superintendent by the Hospital Attendant's Protective Union, and another lately formulated by Dr. W. A. White, respectively:

Scale of wages.

For males:

	Per month.
Attendants during period of probation.....	\$18. 00
Associate attendants after probation—	
First year.....	20. 00
Second year.....	22. 00
After two years.....	25. 00

For males—Continued.

	Per month.
Head attendants, two years service after probation being requisite for eligibility thereto.....	\$30.00
Nurses in training, after probation—	
First year.....	20.00
Second year.....	25.00
Associate nurses after graduation.....	30.00
Head nurses after graduation.....	35.00
Chief nurses, one in each department, except Howard Hall.....	40.00 to 45.00
Supervisors, one in each department, except Toner group.....	40.00 to 45.00
Chief supervisors, one in each department.....	50.00

For females:

Attendants during the period of probation.....	14.00
Associate attendants, after probation—	
First year.....	16.00
Second year.....	18.00
After two years.....	20.00
Head attendants, two years service after probation being requisite for eligibility thereto.....	25.00
Nurses in training, after probation—	
First year.....	18.00
Second year.....	20.00
Associate nurses after graduation.....	25.00
Head nurses after graduation.....	30.00
Chief nurse, one.....	40.00 to 45.00
Supervisor, one.....	35.00 to 40.00
Chief supervisor.....	50.00

In the foregoing scale it can be seen there is no opportunity for favoritism or cause for the least dissatisfaction. When a man entered service at this hospital he knew what to expect in the matter of wages.

The following is a scale of wages submitted to Dr. White by the Hospital Attendants' Protective Union:

FOR MALES.

Male attendants during the first six months of service, which shall constitute the period of probation, \$22.50 per month; during the second six months of service \$27.50 per month; during the second year service \$32.50 per month; and after the second year of service \$40 per month; head attendants in charge of wards, after two years service, \$42.50. Male nurses in training shall receive pay according to the attendants' scale of wages until graduation, when, as associated nurses, they shall receive \$42.50 per month; head nurses in charge of wards, \$45 per month; head nurses in charge of hospital wards, \$47.50 per month.

FOR FEMALES.

Female attendants during the first six months of service, which shall constitute the period of probation, \$18 per month; during the second six months of service \$22.50, during second year of service \$27.50, and after two years service \$35 per month; head attendants in charge of wards two years service, \$37.50 per month. Female nurses in training shall receive pay according to the attendants' scale of wages until graduation, when, as associate nurses they shall receive \$37.50 per month; head nurses in charge of wards, \$40 per month; head nurses in charge of hospital wards \$42.50 per month.

The just and qualifying tendence of the preceding scale is self-explanatory.

We follow with the scale of Dr. White, over which there is so much dissatisfaction. We quote it verbatim.

Schedule of pay of attendants, nurses, and supervisors.

	Males.	Females.
Probationers.....	\$18	\$15
Attendants.....	\$20 to 25	\$15 to 20
Charge attendants.....	25 to 35	20 to 30
Nurses.....	25 to 35	20 to 30
Charge nurses.....	30 to 40	25 to 35
Chief nurses.....	35 to 45	30 to 40
Assistant supervisors.....	35 to 45	30 to 40
Supervisors.....	40 to 50	35 to 45

The period of probation will be the first six months. All advances in the above scale of wages from minimum to maximum in each grade to be made at the rate of \$2.50 for each six months of continuous service until the limit is reached.

Female attendants and nurses on duty in male wards to receive \$2.50 extra per month.

All changes in salaries to date from the first of the month next following change in pay or employment, unless the same occurs on the first of any month.

WILLIAM A. WHITE,
Superintendent.

Attention is directed to the last two lines of the first paragraph, which says, "at the rate of \$2.50 for each six months of continuous service until the limit is reached." What limit? How can there be a recognized limit when the scale has a difference of \$10 for the same class of attendants.

Now the motive in this scale of Dr. White is very clear to those who can read between the lines. It is nothing more or less than he intends to promote those attendants and nurses who have graduated in the training school. For instance: If a charge attendant is a graduate he gets the promise of \$40 per month, and if he is not he will receive \$10 less per month, etc.

Is not this contemplated promotion of the graduated nurses an injustice to the many who have spent nearly half their lives in this institution in the care of the insane?

It is no less an injustice to the patients confined here.

A man or woman can never become qualified by a theoretical education to handle insane patients, especially where there are no two cases similar upon any of the wards of this institution. They no doubt become adepts in bandaging a cut head, or apply a balm to a wound, or hold a bundle of absorbent cotton at, or even assist in some delicate operation, but can they learn to humor John Smith in his delusions upon a fixed subject, or John Brown when he imagines some one is stealing his wife or attempting his life, or John Jones, who imagines he is a human top and tries to spin his life away? No. If a man or woman does not receive a practical education along this line, he or she would be like that proverbial bull in a china shop. Experience is their best and only teacher.

To probe deeper in the condition of the patients we will continue along that line:

Doctor White issued an order through the supervisors that the night vessels, heretofore left in the rooms of the locked-up patients, should be taken therefrom. These men were locked up from 8 o'clock p. m. until 6 o'clock a. m.—10 hours. The excuse Doctor White gave in clearing his conscience was that it was a bad habit, and a man should be broken of such a habit, because he, Wm. A. White, did not practice it. Perhaps by restriction of this character many of the insane patients fared like the little boy our mothers used to tell us of, who played with fire. The feeblest of these patients wallowed in their own filth until they were cared for by the attendant.

Doctor White is complaining on account of a few married attendants leaving the institution two or three nights in the week to spend them with their families. It will no doubt revert to some or all of the married men being discharged, notwithstanding the fact that they are the best attendants in the asylum in point of stability and attention to duty.

The indifference of Doctor White to the well-being of both attendants and patients is cruel. We know of cases where intelligent patients have asked and even written to him, praying an interview, but no attention has been paid to their appeals.

The removal of Doctor Simpson is greatly deplored. He had been here so long, and during that time, by kindness to the majority of attendants and patients alike, he became very dear to them. We humbly make the request that the case of Doctor Simpson be reopened and reconsidered and that he be reinstated. Many of us believe or think that if Doctor Simpson had been here we would not have had so much trouble. There is only a few here among the employed force or patients who do not regret the absence of Doctor Simpson.

Now, in submitting these truth facts to the honorable board of visitors we do so with a feeling that we will be fairly treated and our grievances will be fully recognized and adjusted. We respectfully subscribe ourselves your humble and obedient servants.

T. O. Pyles, nurse; C. L. Skinner, O. A. Wilson, H. S. Carroll, C. E. Thrift, C. M. Boswell, A. G. Sydnor, J. S. O'Bannon, N. R. Hill, U. C. Rollins, N. E. Kemper, E. E. Day, H. M. Sothron, J. B. Mayhew, Fitzhugh Lee, J. N. Furgurson, J. A. Williams, J. Wayland, W. H. Ford, Chas. King, I. Miskell, H. Groves, R. L. Browning, Walter Green, Guy P. Linkins, G. G. Jones, Benson Taylor, C. W. Doran, Geo. B. Thorne, T. W. Moffitt, B. Tennyson, P. Boyle, J. M. McWelch, C. M. Lucas, M. B. Harbaugh, I. Wathen, D. M. Willett, F. W. Smith, M. S. Davis, C. H. Bicksler, T. Gough, U. S. Thrall, D. Boswell, F. Chin, G. H. Poppan, W. T. Green, jr., F. W. Hodgers, A. B. Peaper, W. S. Lawrance, L. Green, C. C. Nicholson, W. G. Leapley, and many others. (See page 936.)

Mr. WALLACE. Speaking of the epileptics, when did that classification go into effect?

Dr. WHITE. We commenced it a long time ago, I should judge over a year ago. We are still classifying patients, and will be doing it for probably some little time to come.

Mr. WALLACE. Do the epileptics, as a class, get a special diet different from the general run of insane patients? If so, state the difference.

Dr. WHITE. No, sir; they do not.

Mr. WALLACE. You exercise personal supervision of contracts for supplies and of purchases made without contract, do you not?

Dr. WHITE. Yes, sir.

Mr. WALLACE. You also see that everything is up to contract requirements before you pay the bills?

Dr. WHITE. Yes, sir.

Mr. WALLACE. Can you say whether the new buildings you accepted and paid for were properly inspected by you and whether they came up to the contract requirements?

Dr. WHITE. I think they did, sir.

Mr. WALLACE. Do you know anything about the matter of purchasing locks from a local dealer at 90 cents a lock which had previously been purchased for 35 cents per lock from the manufacturer in Baltimore?

Dr. WHITE. I have a very hazy recollection on that point. My recollection is that the manufacturer had ceased to manufacture the particular type of lock, which was one that was installed in the hospital many, many years ago—I don't know but that it was forty or fifty years ago—and we had to have these locks made to order. They could not be bought out of a stock but had to be made to order. That is my recollection.

Mr. WALLACE. That is why the change was made?

Dr. WHITE. That is why any additional price had to be paid, I presume. I am not absolutely certain. That is my recollection of it.

Mr. WALLACE. Do you keep any record of complaints made against attendants or employees?

Dr. WHITE. Yes, sir. Those complaints are filed in the civil service clerk's office, and he keeps track of them. We have a clinical record, as it were, for each employee, just as we have for a patient, so that when anything comes up in regard to him we can review his record.

Mr. WALLACE. I was not through with the question. Do you keep any records of complaints made against attendants or employees or of offenses committed by them known as the "black book" or complaint book?

Dr. WHITE. There is not such a book in existence.

Mr. WALLACE. Have you any rule that there must be three offenses by an attendant before discharge?

Dr. WHITE. No, sir; absolutely not.

Mr. WALLACE. How many deaths by suicide have occurred since you took charge?

Mr. SMYER. Of course you mean out there?

Mr. WALLACE. Yes; self-destruction out there.

Dr. WHITE. I can't tell absolutely. Our annual reports would show. I think perhaps four or five.

Mr. WALLACE. Could these not have been prevented by proper care and attention?

Dr. WHITE. I investigated every one of those cases, and always do, of course, in such a case, and I don't think I ever found any delinquency on anybody's part. The question of preventing suicides is a large one. Every suicide that happens in the institution is a matter of the deepest sort of regret to the management. We do everything we possibly can to prevent them. I am prepared to state that there are certain cases of suicidal patients, who, if they continue suicidal for any length of time, will ultimately succeed. I am very thoroughly acquainted with the suicide proposition. I have had a great many desperate suicides under my personal charge, and I have looked into the matter in detail. I have gone so far as to dismiss my nurses and watch my suicidal patients myself on purpose to appreciate what the problem is, and I know that there are certain few patients who are suicidal and that nothing under heaven in the way of personal supervision will prevent them from succeeding. But those cases are fortunately and thankfully rare.

Mr. WALLACE. When did you begin the keeping of the very complete records of cases such as have been put in the record here in the Griffin and Lochte cases?

Dr. WHITE. I started on improving the condition of the records almost the first thing I went there, but, of course, we have had some 15,000 patients go through that institution, and I don't presume we yet have all of our records in first-class shape and probably will not have for some time to come; but we have been in process of trying to get those records in shape ever since I have been there. It has been a constant problem with me.

Mr. WALLACE. Has Dr. Hummer been employed in getting up these records?

Dr. WHITE. Every physician who has charge of a service does his share toward keeping those records as they should be kept.

Mr. WALLACE. In your explanation, Doctor, of improper charging of expenditures against your farm and garden accounts, etc., your special appropriation in the sundry civil bill had run short and you took the money from the District of Columbia appropriation for "support," and, as a matter of bookkeeping, charged these special expenditures against the farm and garden accounts?

Dr. WHITE. That is a complex question, and I do not think I see it exactly. Let me explain how the District appropriation is utilized by us, and perhaps that will answer it. We render every month to the District of Columbia a bill. It is a bill that covers about sixty pages of paper of that size [indicating] for every patient chargeable to the District at the rate of \$4.23 per week, which is \$220 per annum. Then that bill is passed upon by the District auditor, and the amount of the bill is covered into the support fund of the hospital by counter warrants through the Treasury Department. Then it is possible to draw upon that through a warrant issued by the Secretary of the Interior, placing the money to my credit, and any money placed to the credit of the support fund of the hospital from any source is utilizable for the support of the hospital, and for any part of it. It would be impossible to segregate it—I do not know that it would be impossible, but there is nothing to be gained by segregating it. In fact, the District money, when it is covered into the support fund of

the hospital, absolutely loses its identity as District funds. It becomes a part of the general support fund of the hospital, which we draw against through Interior Department warrants.

Mr. WALLACE. Did not this necessitate economy in the "support" side of your ledger and cause the retrenchment of expenditures for fruits, sugar, butter, and attendance, as testified to by Mrs. McLaughlin, Miss Herbert, Mr. Hayden, and others?

Dr. WHITE. You have asked something in asking that question that you intended to show by the first question. I don't know that I can answer it. Of course we exercise economy. As a custodian of Government funds I believe it is my business to exercise due economy and to see that the Government gets a dollar's worth of value for every dollar expended. I exercise that with proper consideration for the interests of all parties concerned.

Mr. WALLACE. That is directed to particular articles—fruit, etc.?

Dr. WHITE. It is directed in general.

Mr. SMYSER. In other words, to make one side show up good you cut off sugar and fruit?

Dr. WHITE. I never cut off sugar except to limit the amount of waste—the undue use of sugar that I thought was unnecessary and wasteful. I did cut off some fruit a long time ago because, under the then existing conditions of the storeroom, fruit which was bought was not used for the purposes for which it was intended, and it was deflected from the patient population for whom it was bought in all sorts of directions. We have bought considerable fruit since then from time to time, because now we are in a position where we can exercise more careful supervision and see that it goes where it was intended to go; but I was not buying fruit to be distributed broadcast around among employees, etc., when I wanted it for the patients, and until I had a system which would insure its proper distribution I did not buy it.

Mr. HAY. Doctor, in connection with these charges of cruelty, it has been stated by one of the employees at the hospital—it is not necessary to say who it was—that under your administration there is more intermingling between the female and male inmates than there was under the administration preceding yours. What have you to say about that?

Dr. WHITE. I can't say anything about previous administrations. I can only say that when I went to the institution I found these 15 buildings in process of erection, and in putting them to what I believed the best possible use I have tried, so far as possible, to segregate the female population to one portion of the grounds rather than to mix them up indiscriminately among the male population. Of course I had something of that in view, although in general the reason for that was to put all the women in one part, so that all of the nurses would be accessible to the nurses' home. The female part of the hospital now occupies practically a triangle, at the apex of which stands the nurses' home, where the female nurses live. For various matters of convenience it is better to have it that way. I think the females are perhaps better segregated than under the old management, where males and females were really in the same building—in the old main building—half of which was men and half of which was women. Under the present condition of affairs it will all be men.

Mr. HAY. This statement related to the paroled patients—those who have parole and can walk around the grounds.

Dr. WHITE. They merely have liberty to walk about the grounds, and they had that before. I don't see that there is any reason why they should intermingle now more, under the same conditions, than they did then. Of course we try to give parole as freely as we can.

Mr. HAY. So that you say that under your administration there has been no relaxation in the rules?

Dr. WHITE. I am not aware that there has been. Of course I can not speak for former administrations, but I am not aware that there has been. We do not give people parole if they are going to abuse it in any such way as that. At the same time, we do not want to make a prison out of the institution. We want to give parole as frequently as we can.

The committee (at 12 o'clock, meridian) adjourned until Monday, June 4, 1906, at 2 o'clock p. m.

HOUSE OF REPRESENTATIVES,
June 4, 1906.

The committee met at 2 o'clock p. m.

Present: Messrs. Olcott (chairman), Smyser, Barchfeld, Hay, and Wallace.

Also Dr. White, Mr. Evans, Dr. Emmons, and others.

TESTIMONY OF DR. WILLIAM A. WHITE—Continued.

Dr. WILLIAM A. WHITE, having been heretofore sworn, was examined, and testified as follows:

Mr. HAY. Doctor, how often does the board of visitors meet? I do not mean the subcommittee of the board, but I mean the full board.

Dr. WHITE. They meet, as provided by statute, twice a year. They have an annual and a semiannual meeting. As a matter of fact they have met a great many times more than that; I can't tell you how many.

Mr. HAY. A full meeting?

Dr. WHITE. Well, there may have been somebody absent who was out of town, or something of that sort. As secretary of the board, of course I have records of all the meetings. I haven't them with me, however.

Mr. HAY. What do they do, Doctor?

Dr. WHITE. They consider various questions with relation to the institution, of all sorts.

Mr. HAY. As to the employment of attendants and employees, etc., they have nothing to do with that?

Dr. WHITE. That is practically left entirely with me.

Mr. HAY. That is given to you under the law, is it not?

Dr. WHITE. Under the statute; yes, sir.

Mr. HAY. They have nothing to do with the treatment of patients, have they?

Dr. WHITE. Nothing specifically. As regards the employment I want to say, Mr. Hay, that in that Department, as in every other, if

there is anything extraordinary contemplated, such as the creation of a new position, or something of that sort, such as an increase in salaries—anything unusual—I bring it before them. I always bring everything before them.

Mr. HAY. They would have no authority to veto anything you did in that regard, because the statute says, in explicit terms, that you shall employ, etc.

Dr. WHITE. It says that; yes, sir; but at the same time I would be very apt to not go counter to their expressed desire.

Mr. HAY. You go to them, of course, as an advisory board and ask their views, but I mean as a matter of fact you are not in any way under their control?

Dr. WHITE. I don't know as to that. Their authority never has been adjudicated. I should think, from the reading of the statute, that they have a good deal of authority, but just what its limitations are I would not be prepared to state, because it never has been adjudicated.

Mr. HAY. What do you think about the appointment by Congress or by the President of a lunacy commission?

Dr. WHITE. I don't see the necessity of it, Mr. Hay, for this reason: Responsibility has always to rest somewhere. The object of lunacy commissions throughout the States is to exercise a control of lunacy matters where there are a number of institutions; and where there are a number of institutions, it is desirable that they shall all be conducted along essentially the same lines, and that anything that is exceptionally good in one institution another institution shall have the benefit of. It is for the purpose of getting a certain amount of interaction and mutual benefit between the institutions, and supervising the problem as a whole. Where there is a single institution it would seem to me there is no occasion for the appointment of such a board. Authority has to rest somewhere. If it does not rest in the superintendent, it is merely a matter of removing it by one to somebody else, and they become just as responsible.

Mr. HAY. But my idea of a lunacy commission is that if there were, say, three lunacy commissioners, or as many as you please, among their duties it would be one duty to inspect the asylum at times, or at any time.

Dr. WHITE. Yes, sir.

Mr. HAY. They could drop down just like an army inspector does who inspects army hospitals.

Dr. WHITE. Yes, sir.

Mr. HAY. Or an inspector who inspects any branch of the service?

Dr. WHITE. Yes, sir.

Mr. HAY. Would it not be a healthy thing to have a lunacy commission in the District of Columbia, whose duties would not be at all to conflict with the superintendent's control of the institution, but whose duties would be to inspect and make report as to the conduct of the hospital?

Dr. WHITE. I don't think there could be anything accomplished by that. In the first place, the hospital is not a District institution.

Mr. HAY. It is a Government institution.

Dr. WHITE. But it is not a District institution. There is a distinction between a District institution and a Government institution.

Mr. HAY. Would it not be a good thing for the Government to have a lunacy commission to inspect this institution?

Dr. WHITE. I can not see that anything would be accomplished except that responsibility would perhaps be removed from one point.

Mr. HAY. I can not see how it would remove responsibility.

Dr. WHITE. It does not remove it, but it vests the responsibility in somebody else. I do not see anything to be gained by it, Mr. Hay.

Mr. HAY. It was intended that the board of visitors should discharge all of those functions, I have no doubt.

Dr. WHITE. Yes, sir.

Mr. HAY. But it is an honorary board. They are not paid anything, are they?

Dr. WHITE. They are not paid, sir.

Mr. HAY. It is composed of different classes of people. I do not know who they are. The chairman of the board, I understand, is an ex-Surgeon-General of the Navy.

Dr. WHITE. There are three Surgeon-Generals on the board, sir.

Mr. HAY. Dr. Gunnell?

Dr. WHITE. Dr. Gunnell is at present.

Mr. HAY. Dr. Moore?

Dr. WHITE. He is a retired Surgeon-General of the Army.

Mr. HAY. What aged man is he, 78 or 80?

Dr. WHITE. He is about 80; yes, sir. Dr. Wyman, who is the acting Surgeon-General of the Marine-Hospital Service, is a member.

Mr. HAY. What influence has a member of the board in having people placed in the hospital?

Dr. WHITE. None at all. The law provides how people shall be placed in the hospital, and that is the only way they can get there.

Mr. HAY. I understand that.

Dr. WHITE. There is an old statute providing for the commitment of patients by application to the board, but that is practically defunct since the Bryant decision, which said it was unconstitutional.

Mr. HAY. Have any patients been admitted to the hospital since you have been there under that statute?

Dr. WHITE. No, sir; I wouldn't take them under that statute.

Mr. HAY. This Bryant decision was had before your time?

Dr. WHITE. Yes, sir; I think it was had somewhere in the neighborhood of 1895. I am not sure as to the date, but I don't think I am very far away when I mention that date.

The CHAIRMAN. Doctor, have you ever made any comparison relative to the cost of the care of patients in the hospital and those in other hospitals? I mean taking the reports of the other hospitals as to your facts.

Dr. WHITE. Yes, sir.

The CHAIRMAN. Will you state something on that question? I think, perhaps, that was partially covered in the last hearing.

Dr. WHITE. In the first place, the comparison of this institution with any State hospital is not a fair comparison as regards cost, but making the comparison, our per capita cost is in general somewhat higher than the better hospitals throughout the country. The \$220 per capita, however, is not the highest in the country. At least, in our comparison, we discovered two other hospitals with a higher per capita, reckoning the per capita on the same basis on which our per capita is reckoned.

The CHAIRMAN. What were they?

Dr. WHITE. The Danemora was one. I do not recall the other; but I have the figures here which I would be very glad to put in evidence if you like.

The CHAIRMAN. They will be copied in the proceedings.

The paper referred to is as follows:

The Medico-Legal Society submits a list of 79 institutions, showing, a comparative per capita cost, per cent of recoveries, and deaths. They claim that the Government Hospital for the Insane is highest among those named in per capita cost, twenty-seventh in recoveries, and fifth in death rate. We do not know positively what hospital and what years they are taking for their standards, but we took the last reports from the hospitals named in their report and made a comparison showing a number of differences, several where the per capita cost exceeds \$220 per annum, and 34 where the death rate is higher than at the Government Hospital for the Insane, taking the figures of the Medico-Legal Society where we had no report.

In figuring the death rate at this hospital the figures submitted were for the average number and not for the total, as stated in the Medico-Legal Society's report, but to equalize the tables I have based all my figures on the total number treated during the year, the death rate for the Government Hospital for the Insane being 7.4 per cent.

The recoveries are based, as far as possible, on the total number of patients since the beginning of the institution, the per capita cost on figures furnished by hospital reports, estimates for the future being given first preference.

The New Hampshire State Hospital's per capita for the year 1904 is taken from biennial report of that year, and doesn't include improvements and repairs extraordinary; we make \$234.01 instead of \$208. The Dannemora, N. Y., State Hospital's per capita for the year 1905, from the report of the superintendent of State prisons, differs from the Medico-Legal Society's report, as they deduct the officer's salary, which should be included; we make it \$229.35 instead of \$202.80.

In the Illinois Asylum for Insane Criminals, as in some other institutions, the recovery record used is based on two years' admissions and recoveries; cost \$221.78 instead of \$202.

In the Utica State Hospital, as in others, we have taken the total number of admissions since the opening of the hospital and recoveries for same time, if possible to get records, which will make a difference between the Medico-Legal Society's report and ours. We believe the better method of figuring recoveries is on total admissions, not yearly.

Wisconsin State Hospital: Per capita cost based on report of the year 1904 from biennial report of that year we make it \$237.50; instead of \$200.

Maryland Hospital, Catonsville, Md.: Per capita cost of 1905; we make it \$201.50 instead of \$192.

State Hospital, Harrisburg, Pa.: Medico-Legal Society use total number of recoveries for basis, instead of percentage of recoveries.

Nevada Hospital for Mental Diseases: Medico-Legal Society uses percentage of recoveries on total, instead of percentage of deaths.

Danvers, Mass., Insane Hospital: Per capita cost, report of 1905; the cost of water is not included, due to a disagreement over rates with city, no bills accepted and hospital to put in own plant; only one-half coal bill received, and included in cost; death rate should be 8.1 per cent, instead of 7.1 per cent. Per capita cost, \$179.40.

Southern California State Hospital, page 92: "Rate too low, patients lose weight." Cost per capita, \$183.90.

North Dakota State Hospital: Medico-Legal Society's death rate based on total admissions two years, instead of number treated.

Southern Indiana Hospital: Per capita cost based on 1905. Medico-Legal Society cost based on 1903.

Wyoming State Hospital: Per capita cost as per report of 1904; subtracting repairs, improvements, insurance, and transportation, as per page 29, we have \$188.89; Medico-Legal Society, \$164.71.

Southwestern Asylum, San Antonio, Tex.: Number of patients recovered, 20; Medico-Legal Society uses as per cent of recovery.

Missouri State Hospital, No. 2: Death record on two years; no separate record in report. State Asylum, Austin, Tex.: Per capita cost as per biennial report 1904; Medico-Legal Society, same report of year 1903. They include total number discharged in their record of per cent of recoveries; many only improved; few, according to report, restored.

Eastern Hospital for Insane, Knoxville, Tenn.: Medico-Legal Society's report of deaths, white only.

Toledo State Hospital, Toledo, Ohio: Estimates for future, \$135, not including officers' salaries and numerous miscellaneous expenses.

Arkansas State Hospital: Per cent of cost based on estimate for future, and doesn't include appropriation for water or fuel.

State Hospital, Raleigh, N. C.: We already have a hospital called "Raleigh State Hospital." If this is distinct and separate, have not been able to get a report.

Athens State Hospital, Athens, Ohio: Per report of 1905, Medico-Legal Society basis on report of 1903; cost lower, recoveries higher.

Lincoln, Nebr., State Hospital and Nebraska Hospital for the Insane appear to be the same hospital, from different biennial reports, the per capita cost being shown for six months instead of a year.

Central State Hospital of Virginia is a colored hospital the Medico-Legal Society has picked out where three different per capitae are shown, the lowest based on whole number treated, those who died during interim, discharged, etc., even if in hospital one day, charging for a year, while estimates for the year 1906 asks for \$100 per capita.

Comparative table of per capita cost of maintenance, recoveries, and deaths in hospitals for the insane.

[Figures in italics indicate per capita in Medico-Legal Society report. We have no report of our own.]

	Per capita cost.	Percent- age of re- coveries.	Percent- age of deaths.
Government Hospital for the Insane, District of Columbia..... Per capita cost estimated for 1907; recoveries on total number of admissions since opening of hospital; deaths on total number treated during year 1904-5.	\$220.00	32.21	7.40
Hospital for Insane, Wisconsin..... No report.	<i>208.00</i>	<i>30.00</i>	<i>3.00</i>
New Hampshire State Hospital..... Per capita cost for year 1904, per treasurer's report; recoveries on total number of admissions since opening of hospital; deaths on number treated during year.	234.01	32.21	8.80
New York State Hospital, Dannemora..... Per capita cost based on report of 1905, per report of superintendent of State prisons (Medico-Legal Society's per capita excludes officers' salaries); recoveries on year's admissions; deaths on whole number treated.	229.35	23.61	1.62
New York State Hospital, Rochester..... Per capita for year 1905; recoveries on total number of admissions since opening of hospital; deaths on total number treated during year.	202.70	17.95	5.90
Illinois Asylum for Insane Criminals..... Per capita for year 1904 figured on average number of patients for that year and financial statement in report; recoveries on total admissions during year (notable of total admissions and recoveries to hand); deaths on total number treated during year (Medico's deaths on two years).	221.78	55.00	5.96
New York State Hospital, Utica..... Per capita for year 1905; recoveries on total admissions since opening of hospital; deaths on number treated during year (Medico's deaths on average population).	200.74	32.25	7.62
Worcester Insane Hospital..... Per capita for year 1905, per treasurer's report and average popu- lation; recoveries on year's admissions; deaths on total number treated during year.	<i>204.30</i>	21.54	9.00
Wisconsin State Hospital..... Per capita for year 1904 on statement of current expenses; no record of recoveries; deaths on total number treated during year.	237.50	No rec- ord.	5.89
Oklahoma Hospital..... Received a letter telling us they made no report and giving record of deaths of total number treated.	<i>200.00</i>	<i>25.00</i>	5.30
State Hospital, Warren, Pa..... Per capita for year 1905; recoveries on total number of admis- sions since opening of hospital; deaths on number treated during year.	197.60	18.14	6.90
New York State Hospital, Gowanda..... Per capita per report for 1905; recoveries on total admissions since opening of hospital; deaths on number treated during year.	195.31	15.50	4.77
New York State Hospital, Buffalo..... Per capita per report of 1904, with ordinary repairs subtracted; recoveries on total admissions since opening of hospital; deaths on number treated during year.	189.35	21.67	6.50
Maryland Hospital for the Insane, Catonsville, Md..... Per capita per report for 1905, on average number patients; recov- eries on total admissions during year; deaths on total admissions during year.	201.50	29.50	5.00
South Dakota Hospital for the Insane..... Per capita estimated for new year; recoveries on total admissions since opening of hospital; deaths on total number treated during year.	192.00	30.55	6.00

Comparative table of per capita cost of maintenance, recoveries, and deaths in hospitals for the insane—Continued.

[Figures in italics indicate per capita in Medico-Legal Society report. We have no report of our own.]

	Per capita cost.	Percent- age of re- coveries.	Percent- age of deaths.
Pennsylvania State Hospital, Danville..... Per capita per report for 1904 for eleven months with one-eleventh added; recoveries on total admissions since opening of hospital; deaths on total number under treatment during year.	\$190.14	18.38	4.97
New York State Hospital, Hudson River..... Per capita per report for 1905; recoveries on total admissions since opening of hospital; deaths on total number under treatment during year.	191.88	21.45	8.32
Pennsylvania State Hospital, Harrisburg..... Per capita per report for 1904; recoveries on total admissions; deaths on total number under treatment during year (Medico-Legal's recoveries number 32 instead of 32 per cent).	190.00	20.73	7.00
Nevada Hospital for Mental Diseases..... Per capita as per report for 1904 (which as claimed in report is too low); recoveries on admissions during year; deaths on number under treatment during year (Medico-Legal's have through error recoveries instead of deaths).	192.54	35.71	12.98
New York State Hospital, Middletown..... Per capita as per report for 1904; recoveries on total admissions since opening of hospital; deaths on number under treatment during year.	177.49	36.30	5.44
New York State Hospital, Kings Park..... Per capita as per report for 1904; recoveries on number of admissions during year (Medico-Legal's evidently include improvements); deaths on number treated during year.	181.11	25.23	7.00
Massachusetts Insane Hospital, Northampton..... Per capita as per report for 1905, repairs subtracted; recoveries on admissions during year; deaths on number under treatment during year.	176.81	10.59	6.8
Michigan Asylum for Insane..... Per capita as per report for 1904, repairs subtracted; recoveries on admissions during year; deaths on number under treatment during year.	176.34	21.34	7.8
New York State Hospital, St. Lawrence..... Per capita as per report for 1905, repairs subtracted; recoveries on total admissions since opening of hospital; deaths on number under treatment during year.	176.00	20.61	6.7
New York State Hospital, Willard.....	182.19	32.40	7.5
New York State Hospital, Matteawan..... Per capita as per report for 1905; recoveries on total admissions since opening of hospital; deaths on number under treatment during year.	181.05	23.65	2.92
Massachusetts Insane Hospital, Danvers..... Per capita as per report for 1905 (no charge for water; disagreement over rates with city; no bill accepted and hospital to put in own plant; only one-half of coal bill received); recoveries on total admissions during year; deaths on total number under treatment in year.	179.40	15.80	8.1
Eastern Indiana Hospital..... Per capita as per report for 1904; recoveries on total admissions since opening of hospital; deaths on number under treatment during year.	176.29	22.79	6.49
Illinois Western Hospital for the Insane..... Per capita as per biennial report 1904; recoveries on biennial average admissions and recoveries; deaths on biennial and total.	175.00	21.5	7.80
Connecticut Hospital for Insane..... Per capita as per reports for 1903-4; recoveries on total admissions since opening of hospital; deaths on total number under treatment during year.	174.20	19.54	5.6
Southern California State Hospital..... Per capita as per report of State commission on lunacy, ordinary repairs subtracted, but contingent included; recoveries on total admissions since opening of hospital; deaths on total number under treatment during year.	183.90	36.00	6.92
North Dakota State Hospital..... Per capita as per report for 1904; no record of total recoveries; deaths on number under treatment during year (Medico-Legal's records on ten years' admissions).	170.38	27.08	7.57
Southern Indiana Hospital..... Per capita as per report for 1904; recoveries on total admissions since opening of hospital; deaths on number under treatment during year (Medico-Legal bases cost on report for 1903).	176.97	28.28	8.00
Delaware State Hospital, Farmhurst..... Per capita, as per biennial report for 1904, including repairs; recoveries on total admissions since opening of hospital; deaths on total number under treatment during year.	168.28	28.78	8.4

Comparative table of per capita cost of maintenance, recoveries, and deaths in hospitals for the insane—Continued.

[Figures in italics indicate per capita in Medico-Legal Society report. We have no report of our own.]

	Per capita cost.	Percentage of recoveries.	Percentage of deaths.
West Virginia Hospital for the Insane.....	\$168.00	31.80	5.9
Per capita as per biennial report, 1904; recoveries on total admissions since opening of hospital; deaths on number under treatment during year.			
Independence, Iowa.....	168.00	21.67	6.00
No per capita cost given; recoveries on total admissions since opening of hospital; deaths on number under treatment during year.			
Illinois Northern Hospital for the Insane.....	168.00	22.97	8.55
Per capita figured on quarterly report of Illinois charities, December, 1905; we have no record of recoveries and deaths.			
New York, Manhattan, Wards Island.....	167.71	13.65	6.21
Per capita as per report for 1905; recoveries on total admissions since opening of hospital; deaths on number under treatment during year.			
Long View Hospital, Cincinnati, Ohio.....	167.45	34.74	8.58
Per capita as per report for 1905; recoveries on total admissions since opening of hospital; deaths on number under treatment during year.			
Wyoming State Hospital.....	188.89	34.51	5.79
Per capita as per report for 1904, deducting repairs, transportation, and insurance; recoveries on total admissions since opening of hospital; deaths on number under treatment during year.			
Northern Indiana Hospital for the Insane, Logansport.....	163.00	22.65	8.63
Per capita as per report for 1904; recoveries on admissions during year; deaths on number under treatment during year.			
Asylum for the Insane, Arizona.....	160.16	30.00	9.8
Per capita as per report for 1904; recoveries on total number treated; deaths on number treated during year.			
Medfields Insane Asylum, Massachusetts.....	167.07	4.7
Per capita as per report for 1905, including liabilities due and unpaid and subtracting repairs; chronic insane; no recoveries; deaths on total of two years' treatment.			
Eastern Washington Hospital.....	155.13	31.32	5.88
Per capita on estimates for next two years; recoveries on total admissions since opening of hospital; deaths on number under treatment during year.			
North Carolina State Hospital, Raleigh.....	159.00	51.22	7.56
Per capita as per report for 1904; recoveries on admissions for two years; deaths on total two years' treatment.			
Central Kentucky Asylum for the Insane, Lakeland.....	148.76	43.00	9.00
Per capita as per report for 1905; recoveries and improvements not separated; deaths on number treated during year.			
Kansas State Hospital, Topeka.....	143.68	34.17	5.31
Per capita as per report for 1904, subtracting all repairs; recoveries on total admissions since opening of hospital; deaths on number treated during year.			
Southern Asylum, San Antonio, Tex.....	153.00	13.79	5.50
Per capita as per report for 1904; the figures subtract the inventory value of support, maintenance, etc., on hand at end of the year; the number of recoveries during the year was 20 and the percentage is on year's admissions, as we have shown; no record of total recoveries; deaths on total number treated during year.			
Eastern Kentucky Asylum.....	150.00	10.47	7.08
Per capita assumed on average of 1,015 patients; no average or per capita in report for 1905; no total recoveries, our record on admissions and recoveries of year; deaths on number under treatment during year.			
California State Hospital, Agnew.....	146.00	27.98	7.48
Per capita as per estimates California biennial report of State commission on lunacy; recoveries from foregoing total admissions; deaths from foregoing total treated.			
Missouri State Hospital No. 2.....	145.60	41.43	12.13
Per capita as per biennial report of 1904; recoveries on two years' admissions and discharges; deaths on two years' total number treated and died.			
Iowa State Hospital, Clarinda.....	144.00	38.8	6.5
Iowa State report received later varies slightly.			
Iowa State Hospital, Mount Pleasant.....	144.00	18.00	6.4
Iowa State report received later varies slightly.			
Minnesota State Hospital, Hastings.....	140.41	3.0
May possibly mean Hastings, Nebr.			
Borden Eastern Tennessee.....	135.00
Texas State Asylum, Austin.....	142.61	5.53
Per capita as per biennial report 1904 (Medico-Legal picked out year 1903, which was lower); no record of recoveries (Medico-Legal uses total discharges on year's admissions, of which said report said "few received final discharge"); deaths on number treated during year; report does not mention recoveries.			

Comparative table of per capita cost of maintenance, recoveries, and deaths in hospitals for the insane—Continued.

[Figures in italics indicate per capita in Medico-Legal Society report. We have no report of our own.]

	Per capita cost.	Percent- age of re- coveries.	Percent- age of deaths.
North Texas Asylum for the Insane..... Per capita as per estimate for expenditures and maintenance report for 1904 (the figures in said report allow for inventory, etc.); recoveries on total admission since opening of hospital; deaths on number treated during year.	\$158.85	47.89	3.66½
Colorado State Asylum..... Per capita as per report for 1904; recoveries as reported 1904 for biennial term of total admissions, deaths on total treated for biennial term.	144.52	12.00	7.89
State Mental Hospital, Provo, Utah..... No regular report, all information from letter from the superintendent.	125.13	41.40	5.26
Illinois Asylum for Incurable Insane..... Results obtained from Illinois bulletin of public charities; no regular set of figures upon which to base calculations.	147.20	2.00	6.3
Ohio State Hospital, Cleveland..... Per capita as per report for 1904; recoveries on total admissions; deaths on number treated during year.	144.79	39.27	4.3
Ohio State Hospital, Dayton..... Per capita as per report of 1905; recoveries on total admissions since opening of hospital; deaths on number treated during year.	142.70	37.54	7.49
Georgia State Asylum..... Per capita as per report for 1905, based on estimates for the next year; recoveries on admissions during year; deaths on total treated.	127.75	37.18	10.79
Alabama Insane Hospital..... No way to figure out per capita cost as no average number of patients is given, no recoveries given in annual report; deaths on total year's treatment.	130.00	40.90	7.00
Eastern State Hospital, Virginia..... Per capita as per report for 1905, estimate for future; recoveries on total admissions; deaths on year's treatment.	129.18	42.00	7.73
California State Hospital, Stockton..... Per capita as per report for 1904, recoveries on total admissions, deaths on total treated.	127.75	28.57	8.93
Eastern Hospital for Insane, Tennessee..... Per capita as per report for 1904; recoveries on year's admissions; deaths on year's treatments. (Medico-Legal deaths on report of white only.)	125.00	28.05	12.24
Ohio State Hospital, Toledo..... Per capita as per report for 1905; recoveries on total admissions; deaths on year's treatments. (Estimated for 1906, \$135 per capita exclusive of officers' salaries, etc.)	124.50	23.90	7.73
Oregon State Insane Asylum..... Per capita as per report for 1904; estimates for future (Medico-Legal report as taken does not include cost of light, transportation, repairs, etc.); recoveries on total admissions and recoveries; deaths on total treatments and deaths two years.	119.76	24.03	13.59
Western Washington Hospital for the Insane..... Per capita as per State board report for 1904, estimates for the next year; recoveries on total admissions; deaths on year's treatments.	118.80	32.31	8.70
Ohio State Hospital, Massillon.....	114.50	33.66	10.00
North Carolina State Hospital, Goldsborough..... Per capita as per report for 1904, recoveries on two years' admissions, deaths as per report, apparently on year's treatments.	100.89	32.95	9.51
Louisiana State Insane Asylum..... Report for biennial term ending March, 1906, received, records not kept so as to obtain necessary statistics.	104.87	37.75	4.15
Arkansas State Hospital..... Per capita as per report for 1904, estimates for future appropriations; present cost too low; recoveries on year's admissions; deaths on year's total treatments and deaths.	120.00	30.00	4.70
North Carolina State Hospital, Raleigh.....	98.00	40.00	8.00
Ohio State Hospital, Athens..... Per capita as per report for 1905, recoveries on total admissions and recoveries, deaths on treatments during year. (Medico-Legal reports on year 1903, the lowest cost and highest recovery year.)	102.06	36.33	8.57
Nebraska State Hospital, Lincoln..... Nebraska Hospital for Insane per capita as per report for 1904; recoveries on total admissions and discharges since opening of hospital; deaths on total number treated and died during year. (Medico-Legal report has apparently two biennial records of this hospital figured as different hospitals, using 6 months per capita cost for each.)	170.16	35.39	5.12
Central State Hospital of Virginia..... Per capita as per report for 1905, estimate for new year, recoveries on total admissions, deaths on total number treated. (Negro Hospital.)	100.00	40.23	9.04

The CHAIRMAN. Dannemora is in New York, is it?

Dr. WHITE. Yes, sir.

The CHAIRMAN. What is the size of that hospital?

Dr. WHITE. About five or six hundred patients, I think. For instance, at the Dannemore Hospital, the per capita, calculated in the same way that we calculate our per capita, is \$229.35. The per capita of the New Hampshire State Hospital for 1904 was \$234.

The CHAIRMAN. How many are there in the New Hampshire State Hospital?

Dr. WHITE. I don't know, sir. I haven't that here. I should have to look it up.

The CHAIRMAN. Is that a table you have made?

Dr. WHITE. This is a table of per capita costs of the various hospitals that were cited in that little pink pamphlet that the Medico-Legal Society got out. It shows that their figures were not correct, that they had not calculated the per capita correctly, to compare it with ours; but our per capita is higher, I think, except in those two instances. Here is one, the Illinois Asylum for Insane Criminals, \$221. Here is the Wisconsin State Hospital, \$237.50. I had forgotten about those. There are four hospitals that are higher. The per capita of the Binghamton Hospital, where I was, is \$200. But they are not fair comparisons, because we deal with a selected class of the population, and it would be an endless task to make an absolutely fair comparison, because we take, for instance, all the enlisted men from the Army and Navy who are insane.

There is a special class drawn between certain ages. In the State asylums they take all the insane from certain districts. We take the insane from the National Homes. There is another selected class, the minimum age of which is over 60. Whether the age limits of the two classes would balance each other or not I don't know, and it would be an endless task to find out, because it would have to be based upon careful statistical study of the ages of the population of the districts where they come from, etc. It would be a very expensive task. I have not done that. I hardly know how to go to work and do it.

The CHAIRMAN. Doctor, what do you mean by saying that the men who come from the Army and Navy are a selected class?

Dr. WHITE. Take a State hospital, for instance. They take all the insane from a given geographical district. We take the insane, we will say, from the Army, who are all males between certain age limits, and who have gone into the Army under certain restrictions as to health, etc. So there is a distinctly selected class of the population. For instance, the recovery rate or the death rate from a State institution could not possibly be computed with a hospital that has selected classes of the population of that sort. On the other hand, the old soldiers are all old and decrepid, and give us a large percentage of our bedridden cases. That is a selected class.

The CHAIRMAN. Are the bedridden classes that you have larger in number than those of the State hospitals?

Dr. WHITE. I think they are. I am not certain as to that, but I think so. We have over 600 people in our institution who are over 60 years of age, and it seems to me that must be a large percentage, although I can not speak authoritatively on that point.

The CHAIRMAN. The only people you would get who are not of a selected class are the ones you get from the District of Columbia?

Dr. WHITE. Yes, sir; absolutely they are the only ones.

The CHAIRMAN. The rest of them are from a selected class and different classes?

Dr. WHITE. Yes, sir.

Mr. HAY. How many are there from the District of Columbia?

Dr. WHITE. About 1,200. I find we have 733 patients over 63 years of age. Here are some figures I prepared that are rather interesting. The number of patients employed is 600. The number of patients over 60 years of age is 733. The number of patients confined to bed is 231. The number of patients in the hospital over 25 years is 237. So that a fair comparison would be an extremely difficult thing to make.

The CHAIRMAN. Doctor, relative to the autopsies, you of course are familiar with the law that has been referred to during the progress of this investigation?

Dr. WHITE. Yes, sir.

The CHAIRMAN. I mean as to the necessity of hospitals and asylums making reports of deaths to the anatomical board. I think that is what it is called.

Dr. WHITE. Yes, sir.

The CHAIRMAN. Have you considered that with an endeavor to decide whether it applies to St. Elizabeth's or not?

Dr. WHITE. Yes, sir. When I first came to the hospital I received a communication from the anatomical board requesting me to send bodies. I read over the law and I answered the communication. I told them that from my reading of the law I did not think it applied to the hospital. They never answered my communication. I took that as being practically a conceding of my position. One point I made, although a number of points might be made, was that the law reads: "All bodies buried at public expense." Presumably that would mean at the expense of the District. Now, our bodies are not buried at the expense of the District. We have a burying ground there, and they are buried at the expense of the United States. I certainly would be very loath to send bodies of soldiers and sailors and veterans to the anatomical board.

There is an existing statute providing for the burying of old soldiers and sailors in the District. As a matter of fact, we know that people who go to colleges for dissection lose their identity pretty well. They are pretty well cut up, and when they come to be buried—I don't say this as a matter of criticism, because I know nothing about the conditions in the local colleges, but I know the conditions in colleges generally—various parts of various bodies are put together in one box, and simply the label maintains his identity, and they are buried in potter's field. That is distinctly opposed to the policy of the Government as regards the soldier and sailor populations. From that point of view there would only be one class who would come under this law, and that would be the indigent insane of the District of Columbia. They couldn't wholly come under that law either, because it often happens that soldiers or sailors or veterans drift into the District—they may perhaps have a residence there—and are committed as indigents from the District.

So that the class would be still further restricted that would probably come under that law, if the law is applicable, and I took the position that it was not applicable shortly after I came here, and that position never was controverted by the anatomical board. As a matter of fact, Dr. Richardson, I believe, did send them over two or three bodies, but they had been autopsied, and they expressed themselves as not wanting those bodies because they had been autopsied. They were of little or no use to them under those circumstances.

Mr. HAY. Doctor, do you take the position that when the Government provides in a statute, as it does, for the burial of soldiers and sailors, they are therefore buried at public expense, in the meaning of that statute? You do not mean to take a position of that sort, do you?

Dr. WHITE. I do not quite understand.

Mr. HAY. When the Government provides, as it does, for the burial of soldiers and sailors and sets apart a specific appropriation every year——

Dr. WHITE. No; that is exactly the position I do not take, that they are buried at public expense.

Mr. HAY. I do not either.

Dr. WHITE. They are buried under a special statute.

Mr. HAY. They are not buried at public expense in the meaning of that statute.

Dr. WHITE. No; I do not think they are. That is exactly the position I took, and exactly what I intended to convey.

The CHAIRMAN. That is what he said, Mr. Hay.

Mr. HAY. But the inference he intended to convey was that those who contended that this statute applied to St. Elizabeth's Hospital were contending that the soldiers and sailors were paupers.

Mr. SMYSER. That is a wrong impression.

Dr. WHITE. The anatomical board law reads, as I recall it, that the bodies that shall be sent to the medical colleges are bodies which are to be buried at public expense.

Mr. HAY. I say that a soldier or sailor who is buried by the Government is not buried at the public expense.

Dr. WHITE. That is exactly the position I took in the letter in reply to the anatomical board, that therefore that law was not applicable.

Mr. HAY. Just as I would say that a member of Congress who is buried by Congress, while of course he is in a sense buried at public expense, is not buried at the public expense in the sense of being a pauper.

Dr. WHITE. That is exactly the position I took in the letter.

The CHAIRMAN. Mr. Hay, I think you and Dr. White agree exactly about that.

Mr. HAY. I took it that he inferred that anybody who contended that bodies should be sent from over there would contend that it means soldiers and sailors, because they were to be buried at public expense.

Dr. WHITE. No, sir; I did not mean that. The people who are buried at public expense, as I understand it, are people who are buried in potter's field, and we do not bury anybody in potter's field.

Mr. HAY. How do you bury the people of the District of Columbia who are over there?

Dr. WHITE. The people who have no relatives?

Mr. HAY. Yes.

Dr. WHITE. We bury them in our own burying ground.

Mr. HAY. They are buried at the expense of the District of Columbia?

Dr. WHITE. No, sir; not at the expense of the District.

Mr. HAY. Does not the District of Columbia pay you——

Dr. WHITE. They pay a per capita cost for the treatment and maintenance of their patients.

Mr. HAY. Is not that part of it?

Dr. WHITE. I should not say so. Perhaps it is.

Mr. HAY. Do you keep an account of the cost of burial?

Dr. WHITE. No, sir. It is just simply an interpretation of the situation.

The CHAIRMAN. Then anybody who dies over in the hospital, and who has no friends to take the body away is buried in your burying ground over there?

Dr. WHITE. Not everybody. They are buried there or in Arlington. Sometimes if it is an old soldier he expresses a desire to be buried in Arlington, and if there are sufficient funds, we arrange for that burial. If not, we bury them in our own burying ground there, and the quartermaster's department of the army furnishes a headstone. If it is a man from the navy the same thing is true as to him.

The CHAIRMAN. But none of the patients who die in your hospital are buried in potter's field?

Dr. WHITE. No, sir; none of them at all, and that is what I take it, "at public expense" meant.

The CHAIRMAN. Doctor, a great deal has been said in this testimony in regard to the employment of a man by the name of Maenche as foreman of the laundry.

Dr. WHITE. Yes, sir.

The CHAIRMAN. You had complaints made against him from time to time, did you not?

Dr. WHITE. Yes, sir.

The CHAIRMAN. What was done in connection with the investigation of the complaints against that man?

Dr. WHITE. I have already testified somewhat along these lines, but I can repeat briefly. Mr. Burroughs was the first one to present a complaint. He presented a written complaint.

The CHAIRMAN. I do not know that it is necessary to go into that again. There is a man named McMurray who testified that there was unnecessary machinery purchased. He said you had too many machines in the laundry. Have you anything to say about that?

Dr. WHITE. It is a matter of judgment, I presume. I got an appropriation for the increase of laundry machinery, one of the first things I did. The laundry was at that time tremendously congested and could not turn out the work properly. I thought they needed more machinery. That was my judgment in the case, and we put more machinery in. All of it is not in use yet, but it will be very shortly. At that time, also, the hospital was increasing

in size somewhat faster than it is now, and I have not as many patients as I expected then I would have. We have ample machinery.

The CHAIRMAN. You do not think you have too much?

Dr. WHITE. I do not think we have any too much, more than to reasonably provide for increase in the size of the institution and take care readily of what we have to do there. We wash approximately 60,000 pieces a week in the laundry. It is a pretty big institution. Then again the laundry was so constructed that the machinery had been added from time to time, so that it was terribly congested, and it was a terrific place to work in in the summer time. The people suffered throughout the summer from the intense heat there, and one of the things that have been accomplished in the remodeling of the laundry is spreading the machinery out, building a couple of additional wings that are much better ventilated, and giving a great deal better place to work in and a great deal more room.

The CHAIRMAN. What do you know about the George Brown case? He was the man about whom Dr. Ford Thompson testified.

Dr. WHITE. The scald case?

The CHAIRMAN. Brown.

Dr. WHITE. Yes; a man who was scalded.

The CHAIRMAN. Yes.

Dr. WHITE. I don't know that I can say anything about that, sir, except that I know the man was scalded and everything was done for him that could be done. I am entirely familiar with the species of accident that sometimes lets steam into a hopper. I have known it to happen time and time again. The reason for that, I think, has not been fully explained.

The CHAIRMAN. I do not know that it has.

Dr. WHITE. The heaters in the different buildings are practically large iron tanks that have steam coils inside of them. There goes into these tanks a cold water supply pipe, and the steam in the coils heats the cold water, and when it is heated of course it is drawn off as hot water. The supply of water to the heater is regulated by the thermostatic valve. Those valves are notoriously somewhat delicate in operation and occasionally get out of order. When they get out of order, if that thermostatic arrangement does not close the supply valve properly, if the hot water in the heater gets up to a pressure in excess of the pressure in the cold water line, the hot water is going to back up in the cold water supply pipe. That is what happened in this case. The hot water backed up in the cold water supply pipe and let some steam into the hopper on which Brown was sitting. He was feeble and didn't get out of the way as fast as a man actually in full possession of his faculties otherwise would have, and he got scalded. It was an absolutely pure unforeseeable accident.

The CHAIRMAN. Doctor, there was a Mrs. Ogg who testified that she had appeared before you in regard to her husband.

Dr. WHITE. I remember her, and Mr. Ogg, too.

The CHAIRMAN. And she complained of some incivility, or something of that sort.

Dr. WHITE. I have only the faintest recollection of her interview with me. I believe she did have an interview with me. I think I did tell her that I didn't know her husband, and I presume I told her

that because I didn't know him, and that I would look into the case. I know the case of Mr. Ogg. He is a case of chronic melancholia, who had made a number of suicidal attempts, and it was because of his suicidal tendencies that we did not think he was a proper case for discharge; that he might readily kill himself if he were not under the supervision that the hospital could give him and that he probably would not get in his own home.

The CHAIRMAN. Dr. Reyburn testified that on one occasion he was refused admittance to the hospital; that he had gone there and complained of ill treatment of a man by the name of Willis. Do you know anything about that particularly?

Dr. WHITE. I have no recollection of Dr. Reyburn ever complaining to me about the ill treatment of Willis. I did refuse him admission to the hospital once. He came over there in company with Dr. Emmons and Mr. Evans, I believe, and they wanted to examine certain records. As my recollection serves me, I had no knowledge that they wanted to examine the records until they appeared at the hospital and asked. Well, they made the statement that they were public records. I do not concede that at all. I don't think the medical histories of patients, which go into all the private details of family matters, etc., are by any manner of means public records.

I think we should exercise the same care over such records that a physician does over the history of his private patient, and I don't permit those things to be seen by anybody who comes there to see them. I am always willing to consult with any one with regard to the condition of a patient, if I feel satisfied he is interested in the patient's welfare. If I do not think he is, if I have reason to think to the contrary, I don't propose to open up all the records of the institution for him to find out things which he may use to the detriment of the patient.

The CHAIRMAN. In other words, you consider the obligation you incurred when you became a physician still obtains with you now that you are superintendent of the asylum?

Dr. WHITE. Absolutely.

Mr. HAY. Right on that point, was this request by these gentlemen to see the records general, or to see the record of one patient?

Dr. WHITE. A specific case.

Mr. HAY. Whose case was then pending in court on habeas corpus proceedings?

Dr. WHITE. I believe so. I think I told them that they would have to get an order of the court to see the records, and I think they did that.

Mr. HAY. They did not ask to examine all the records of the hospital?

Dr. WHITE. No; of course not.

Mr. HAY. Or to examine them generally?

Dr. WHITE. No, sir.

Mr. SMYSER. Was that declination to Mr. Evans and Dr. Emmons and Dr. Reyburn by reason of any hostility that you had to them?

Dr. WHITE. No personal hostility. I did not believe their interest in the matter was directed toward the welfare of the patient. The question of looking at records, too, even records which are properly considered public records, is covered by an order from the Depart-

ment which gives the head of any department authority to refuse, if he thinks in his judgment they should not be viewed by the people who seek to see them.

Mr. SMYSER. Do you mean the Department of the Interior?

Dr. WHITE. Yes, sir; and I think the position of the superintendent with regard to the records is a very sacred one. We have records of the history of people over there, and I am very certain if it were your mother or sister or brother you would not want anybody and everybody to come and have free access to those records. I take that position as I would with regard to a private patient, and I never show them unless I feel I am thoroughly justified in so doing.

Mr. HAY. Mr. Evans was the attorney for this man, was he not?

Dr. WHITE. I believe so. I don't recall the specific case—I mean the name of the patient under consideration.

The CHAIRMAN. Doctor, you know the witness Pyles, who has testified here, do you not?

Dr. WHITE. Yes, sir.

The CHAIRMAN. He testified that he had complained to you about various cases of cruelty, among others, that patients had been tied to trees.

Dr. WHITE. I don't recall that he ever said anything to me about anybody being tied to trees. He made some very general statements, as I recall it, about attendants teasing patients. I don't think he mentioned a specific instance. At the time he made these complaints I did not think his mental condition was such as to warrant any particular action on my part.

The CHAIRMAN. You know the case of the Corbetts, do you not?

Dr. WHITE. Yes, sir.

The CHAIRMAN. They were a mother and daughter, were they not?

Dr. WHITE. Yes, sir.

The CHAIRMAN. Both of them were committed to the asylum?

Dr. WHITE. Yes, sir.

The CHAIRMAN. How were they committed; do you remember?

Dr. WHITE. They were committed after inquiry into their mental condition before a jury, according to the regular procedure had in the District.

The CHAIRMAN. There were two separate cases taken in court for the commitment of these two ladies?

Dr. WHITE. Yes, sir; I think they have had jury hearings at least twice, and I think three times—not jury hearings. They had a jury hearing when they were committed.

The CHAIRMAN. That is, both of them?

Dr. WHITE. Yes, sir. They had a day in court when a committee was appointed. I don't know whether it was before a jury or not, and then on a writ of habeas corpus they were heard before the court without a jury.

The CHAIRMAN. Did you give testimony in any of those cases?

Dr. WHITE. No, sir.

The CHAIRMAN. Who was the committee appointed?

Dr. WHITE. Mr. Fenning.

The CHAIRMAN. Was that on your petition?

Dr. WHITE. I do not think so. I am rather inclined to think—

Mr. HAY. It was on the petition of Doctor Hamlin, was it not?

Dr. WHITE. I think so. I had nothing to do with his appointment as a committee in those cases; but I think it was on Doctor Hamlin's petition.

Mr. BARCHFELD. Dr. White, you would not like to have the records in this Corbett case made public to the world, the medical history, etc., would you?

Dr. WHITE. I think it would be a very cruel thing to them to have those records made public to the world.

Mr. HAY. I saw them here. They did not have anything in them. They are in the record now.

Dr. WHITE. Well, that is very different from having them public to the world.

Mr. HAY. There is really nothing in them.

Dr. WHITE. Every time those Corbett women have been in court they have been mentally upset for days afterwards.

Mr. HAY. I imagine so.

Dr. WHITE. And no good has ever come of it—nothing but suffering for them.

Mr. BARCHFELD. It is absolutely unprofessional, Doctor, for any physician to discuss the family history of any case, and it would certainly be unprofessional on your part, as the head of this institution, to allow the records, the family history, or the patient's history, to become public property.

Dr. WHITE. I think so, absolutely. I think I would be false to my trust if I did that.

The CHAIRMAN. There was a man by the name of McKnight who testified he had made complaints to you about ill treatment of patients by attendants, and that such complaints had been ignored by you. Do you remember anything about that?

Dr. WHITE. I remember McKnight. I don't remember his making any complaints. He may have. McKnight is a man one could place little or no reliance on anything he said, anyway. I don't know whether he made any complaints to me. He may have and I may not have done anything about it. If I did not, it was because of my judgment as to the value of such complaints coming from him.

The CHAIRMAN. Is he still there?

Dr. WHITE. No, sir; he escaped from the institution.

The CHAIRMAN. Yes, I remember.

Dr. WHITE. He was in Philadelphia the last time I heard of him.

Mr. SMYSER. Doctor, do you know what the per capita cost was out there for the years 1900-1901, 1902, and 1903?

Dr. WHITE. The nominal per capita for a good many years has been \$220. At one time it was \$225. I don't recall just when, but at some time between 1881 and the present time, for a short time, it was \$225. That is, the per capita as fixed by the board of visitors.

The CHAIRMAN. Just in that connection, you say "fixed by the board of visitors."

Dr. WHITE. That is the per capita basis upon which we make out our bills to the indigent District patients.

The CHAIRMAN. Is that determined by the board of visitors?

Dr. WHITE. Yes, sir; it was determined by them.

Mr. SMYSER. How do they determine it?

Dr. WHITE. They have not determined it during my incumbency. I presume they determined it, figuring upon what it cost.

Mr. SMYSER. Just now the committee on appropriations determines it, does it not?

Dr. WHITE. Yes, sir; but they have made their appropriations upon that basis for a good many years.

Mr. HAY. The Committee on Appropriations make the appropriation on the basis of \$220, do they not?

Dr. WHITE. Yes, sir; \$220.

Mr. SMYSER. While the chairman is looking up some matter, I want to call your attention to another thing. A good deal has been said about Dr. Hagner. Was he committed in the ordinary way, do you know?

Dr. WHITE. I didn't know anything about it until the other day, when I looked it up for Mr. Hay. I found that he was not. He was committed, apparently, under this old statute that I have said was declared unconstitutional.

Mr. SMYSER. Is he still insane?

Dr. WHITE. He is demented; yes, sir.

Mr. SMYSER. Have any steps been taken on his behalf by any friends, any society, or in any manner, looking to his discharge from that institution?

Dr. WHITE. Not to my knowledge.

Mr. SMYSER. Do you know whether he has friends here in the city?

Dr. WHITE. He has relatives in the city. He has children in the city.

Mr. SMYSER. How old are they; do you know?

Dr. WHITE. They are grown children; 35 years old, perhaps.

Mr. SMYSER. And no action has ever been taken that you know of?

Dr. WHITE. No, sir.

Mr. SMYSER. Looking to his release?

Dr. WHITE. No, sir; not to my knowledge.

Mr. SMYSER. You were asked numerous questions in respect to Mr. Fenning, an attorney?

Dr. WHITE. Yes, sir.

Mr. SMYSER. Describe somewhat in detail what he did. Is there anything between you as superintendent and Mr. Fenning in respect to the work he does as an attorney, by way of compensation or anything else?

Dr. WHITE. We have absolutely no relations with regard to that work except purely business relations, that are right on the face of it, that I have described.

Mr. SMYSER. A great deal has been said along that line. What, if anything, is there improper in the work he does?

Dr. WHITE. Absolutely nothing. On the contrary, I think it is eminently proper.

Mr. SMYSER. Do you know whether or not any person or any association has called that matter to the attention of the court?

Dr. WHITE. I don't think it has. I don't know that it has. I have been in court on several—I don't know how many occasions—but on occasions when habeas corpus matters were pending, and I have known the remarks that were made there by counsel indicated that Mr. Fenning was acting, and the court knew it. The court has full knowledge, I think, of the whole situation, as far as I know, and I have no knowledge of any objection being made by anybody to his

so acting. Whether it has been or not, I don't know; but I don't think it has been.

Mr. WALLACE. Doctor, will you please state whether you have any arrangement with Mr. Fenning as to what disposition he will make of any large funds he may have in his hands as committee of one of your ex-soldier patients in the event of his death without heirs entitled to them? Have you any arrangement of that kind?

Dr. WHITE. I have no arrangement; no, sir.

Mr. WALLACE. Please explain the difference, if any, there would be between a one-thousand-dollar fund in Mr. Fenning's hands and a one-thousand-dollar fund in the Washington Loan and Trust Company, under such conditions.

Dr. WHITE. Experience would indicate exactly this: As I described, if a pensioner dies without any legal heirs, and the Washington Loan and Trust Company was the guardian, that one thousand dollars would be in the Washington Loan and Trust Company for good and all, so far as I can see. They would not give it up to anybody, naturally, and very properly perhaps, because they would say and have said: "We are under bond to the court, and we can not make any payment unless somebody is properly and legally qualified to receive it." Therefore they might keep that money, and it would be an asset, we will say, of the Washington Loan and Trust Company.

I do not know any instances, and there never has been an instance, so far as I know, where the patient has died leaving that amount of money; but where patients have died and left a small amount of money Mr. Fenning has voluntarily gone into court and asked to be discharged from guardianship, and asked—this was usually before the death of the patient—for authority to pay a small balance, when there was no more money to collect, to the hospital to be used for the personal interest of the patient. The Washington Loan and Trust Company never did any such thing in the world. Of course they are acting within their legal rights, but Mr. Fenning goes further than that in those cases and has acted in a way which was to the benefit of the patient.

Mr. WALLACE. Mr. Fenning gives a bond, too?

Dr. WHITE. He gives a bond, yes; but he has asked to be discharged of his guardianship in those cases. The Washington Loan and Trust Company never has, to my knowledge, and they have thousands of dollars, as I say, which they hold, and hold properly, as regards the law, but at the same time it is there, and I don't know of any way of getting it out. It is so much good money for them, so far as I can see. It doesn't do anybody any good except them.

Mr. SMYSER. You spoke of telephoning the Secretary of War and the Secretary of the Navy in respect to claims of old soldiers. I take it that where it would come to your knowledge an old soldier had a claim, or was likely to have a claim, you would endeavor to inform yourself in that way as to the foundation of it.

Dr. WHITE. You mean a claim for pension or something of that sort?

Mr. SMYSER. Yes; or back pay, or something of that kind.

Dr. WHITE. If it was any benefit to the soldier. I have had some experience which would make me rather disinclined to take any steps toward collecting any back pay unless it could be used specifically for

the benefit of the pensioner. In other words, I would not ask any guardian to go into court and collect back pay which might only make litigation for a lot of distant relatives. I would not do that; but if there was anything to be gained for the benefit of the pensioner I would.

Mr. WALLACE. Just one more question right along there. Do you know of any law that would prevent the heirs of a soldier claiming arrears of pay due him from the Government after his death without previous intervention of a committee?

Dr. WHITE. No, I do not; that is, not unless he was competent himself to sign his pay accounts. In fact I don't see how it could.

The CHAIRMAN. You discharged a man by the name of Satterfield, did you not, Doctor White?

Dr. WHITE. Yes, sir.

The CHAIRMAN. He was discharged after investigation of charges of cruelty to a patient?

Dr. WHITE. Yes, sir.

The CHAIRMAN. Do you know how many attendants you have caused to be discharged on account of accusations of cruelty?

Dr. WHITE. I couldn't tell you; no, sir.

The CHAIRMAN. Has it happened frequently?

Dr. WHITE. There are perhaps half a dozen in the course of a year, but many of the offenses are very trivial, speaking from the point of view of the injury done the patient. I have discharged one attendant for slapping an old lady's face. It did not hurt her at all, but the principle of the thing was the matter involved.

The CHAIRMAN. In other words, your rule as superintendent of that hospital and your habit is to discharge any attendant who is shown to be guilty of anything in the nature of cruel or unnecessarily harsh treatment?

Dr. WHITE. Absolutely; yes, sir. I don't know that I recall now a single instance where a patient has been really injured by an employee, but I have discharged quite a number of people for doing things of that sort which they ought not to—slapping or striking a patient in some way.

The CHAIRMAN. Doctor, do you know anything about any occurrence in the hospital looking toward directing attendance to take patients out of the wards on the days when the board of visitors are in the habit of coming there?

Dr. WHITE. I don't know of any such rule, and I never gave any such order, and would not give any such order.

The CHAIRMAN. Do you know of any such occurrence?

Dr. WHITE. I do not.

The CHAIRMAN. You never heard that suggestion?

Dr. WHITE. I never did. The first time I ever heard of any such thing was since this investigation began.

Mr. BARCHFELD. They take the patients out twice a day?

Dr. WHITE. In pleasant weather; yes, sir. They take them out anyway.

Mr. BARCHFELD. It does not make any difference whether the board visits the institution that day or not? They necessarily go out?

Dr. WHITE. We make no distinction.

The CHAIRMAN. I think you testified, Doctor, did you not, in regard to all the methods of restraint that you have in use now? If there is any doubt about it will you state to me what they are?

Dr. WHITE. I don't think I did, Mr. Olcott. We use the camisole. We use the wristlets, and what has been called here a restraint sheet. I am accustomed to calling it a strong sheet, a sheet which is simply laced over the bed. Occasionally that sheet is arranged with arm-holes or with sleeves. There are a number of variations of that sort of sheet, and occasionally a pair of cuffs. That is, there is a strap about the waist, that has been described, I think, and a large leather cuff which has a partition in the middle in which the hands are put. That is used in cases where the patient tries to do himself injury with his hands—for instance, scratching himself, or sometimes they try to pick their nails out. I have had patients pull their finger nails out. Or if they have a surgical dressing, to confine the hands so that they can not remove the dressing and injure a surgical wound. Those are all the methods.

The CHAIRMAN. Are any of these restraints ever used for any other purpose than for the best care of the patient himself?

Dr. WHITE. That is the only reason they are ever used, sir. They would not be permitted to be used for any other reason. Of course I would modify that to some extent, not only the patients themselves, but other patients.

The CHAIRMAN. Yes.

Dr. WHITE. A patient might be extremely dangerous to others and it might be necessary to restrain him on that account. Of course we have to think not only of the individual patient but of all others with whom he may come in contact. Occasionally a patient has to be restrained to save others from physical injury.

The CHAIRMAN. Could there ever be any of those restraints used by an attendant for the purpose of vindictiveness or personal punishment to any patient?

Dr. WHITE. I don't see how such a thing would be possible. If our wards only had one attendant and one patient on them, all sorts of things could happen; but every ward has 20 or 30 patients and anywhere from two to half a dozen employees, and is visited anywhere from half a dozen to a dozen times a day by some official in connection with the institution, and anything of any kind that went wrong would be bound to leak out sooner or later from some source or other.

The CHAIRMAN. Relative to visitors seeing patients there, is there any fixed rule as to the time when they shall visit the hospital?

Dr. WHITE. I do not know of any written rule. It is generally supposed that they will come between 9 o'clock in the morning and 5 o'clock in the afternoon.

We practically admit visitors who have friends there every day, because we have a great many patients who belong to the laboring class, and often times their relatives will have a half day off, and it would be rather a hardship to refuse them and make them perhaps spend a half day and forfeit a salary. On that account we have a great many visitors on Sunday from the working class. Then of course oftentimes where relatives are very much interested in patients, we grant them special privileges, and they sometimes come

there in the evening after supper. The amount of freedom is really very great, much greater than in any other institution I have ever had any knowledge of.

Mr. WALLACE. Mr. Chairman, there is one point I want to ask about while you are on the subject of restraints. Would it be better for me to ask about it now at this point?

The CHAIRMAN. Go right ahead, Mr. Wallace.

Mr. WALLACE. Doctor, will you state the bed saddle has not been used since the date of the order you put in the record?

Dr. WHITE. It was used on two occasions since that date by Dr. Stack, who came and saw me personally in regard to the matter, and I went with him and saw the patients and authorized its use.

Mr. WALLACE. You state that strait-jackets have not been used less since the date of the publication of the Medico-Legal Society report than before that date?

Dr. WHITE. I have not investigated the matter, but if they have or have not been less used it is because of no intimation from me. I don't like the term "strait-jacket." These things are not strait-jackets. They are camisoles. They are used when they ought to be used. Whether the necessity for their use has been greater or less since the investigation I don't know; but as I said the other day, the investigation has not had the slightest effect upon my method of doing things over at that hospital in this respect or any other.

Mr. WALLACE. Where the term strait-jacket has been used during this testimony, it should be the camisole?

Dr. WHITE. Yes. It is called the strait-jacket, but improperly so.

Mr. WALLACE. Is it or not a fact that your attention having been called to the "restraint" question by the newspaper publications of February 18 and 19 of this year, you made personal inquiry and ascertained that the use of the strait-jacket was more popular than you had believed, and that you then instructed their discontinuance on certain wards on or about February 21, 1906?

Dr. WHITE. No, sir.

Mr. WALLACE. Were not these camisoles, or strait-jackets, as they were called during the testimony, ordered off of wards I, K, N, and R, or some of them, among others, after said newspaper publications?

Dr. WHITE. Not to my knowledge.

Mr. SMYSER. Doctor, you have some inmates over there, have you not, who have not recovered, but whose condition has improved to such an extent that in your judgment their discharge would not be detrimental to the public welfare or injurious to the inmates?

Dr. WHITE. I presume there are such people, if they could be discharged under proper conditions.

Mr. SMYSER. I ask you that question, and I take it from the Ohio statute, which has just exactly what I have read, with this proviso:

"Provided, that before ordering such discharge the superintendent must determine that some friend will properly care for him at his home."

Dr. WHITE. That is the proper proviso.

Mr. SMYSER. So do you conform out there to what is enacted into law out in Ohio?

Dr. WHITE. Absolutely. We are very glad to discharge anybody who is not detrimental to the public welfare.

Mr. SMYSER. The act I am reading, I will say to you, is to build a new hospital at Lima, Ohio, for the criminal insane.

Dr. WHITE. Yes, sir.

Mr. SMYSER. So, recognizing there the presence of such persons, you do try to ascertain whether or not, if discharged, they will be properly looked after?

Dr. WHITE. Absolutely; yes, sir. We try to discharge anybody who will be properly looked after, and sometimes people come and want their relatives discharged, and we may refuse because we think they can not give them the proper care—not because they would be at all apt to be a menace to the public safety, but because they might come to want.

The CHAIRMAN. Doctor, one of the witnesses testified that some privileges were given to some of the nurses that others did not have, mentioning specially a Miss Lane, from Binghamton, a Miss Barry, from Binghamton, and a Miss Fitzpatrick, from Binghamton. Do you know anything about that?

Dr. WHITE. Miss Lane, I think, did not come to us from Binghamton. I have never heard the name Miss Marie before, and Miss Fitzpatrick is not from Binghamton.

The CHAIRMAN. Take the case of Miss Lane first.

Mr. HAY. Was she ever at Binghamton?

Dr. WHITE. Yes; she was a nurse for me in the Binghamton State Hospital for years. She made an application, just as lots of other nurses do, for employment in the hospital—lots of nurses who have been in other institutions. I did not discriminate against her because she came from Binghamton, because I knew her to be an admirable girl, and I employed her, and she was granted no special privilege. Nothing special was done for her further than what was warranted by her ability. She is now occupying a special position, and is not a nurse at all. She is assistant in the pathological laboratory, doing the mechanical work of cutting sections and staining them for the pathologist, so as to eliminate for him that mechanical work and let him devote more of his time to really intellectual work in connection with his specialty.

The CHAIRMAN. You promoted her because, in your judgment, she was the best person for the position?

Dr. WHITE. She was the best person in the institution, in my judgment, for the position. She is a girl far above the average attendant we are able to get as to education and other qualifications.

The CHAIRMAN. I said Miss Marie. I should have said Miss Barry.

Dr. WHITE. Miss Barry was a nurse in Binghamton, and for a short time she was on one of my wards. She made an application some time ago, perhaps a couple of months ago. She was not then in the Binghamton hospital, but she made application in the usual way and was employed in the usual way. I did not discriminate against her because she had been in the Binghamton hospital. We get nurses who have had experience in hospitals all over the country. I knew her to be a good girl, too, and was glad to get her.

The CHAIRMAN. Some complaint was made because Miss Fitzpatrick was appointed a supervisor after she had been in the institution only five years.

Dr. WHITE. She was appointed a supervisor because, in my judgment, she was the most eligible candidate for that position and could

render the best service in that position of anybody who was available for that appointment, and for no other reason.

Mr. SMYSER. There was no favoritism?

Dr. WHITE. The choosing of people solely on a merit basis is the most selfish thing I can do, because it will redound to the credit of the institution in the long run, and the credit of the institution means my credit. If I appoint people who are not competent, the first thing I know I would have all sorts of trouble there, and it would be my own fault and would come down around my own ears.

Mr. SMYSER. Then you purposely are as selfish as can be, is that it?

Dr. WHITE: For the benefit of the hospital; yes. The greatest selfishness in that line is the greatest good for the institution. She was an unusually competent girl, and had, with my permission, I think some two years ago, gone to Philadelphia and taken a post-graduate course in an institution there in surgical nursing, and forfeited her salary during that time. I thought that sort of ambition was worthy of recognition.

Mr. SMYSER. Doctor, I want to read a few lines:

There is no special credit due any superintendent of the present day for advocating methods of kindness and nonrestraint in the care of the insane. These methods have become a part of the very autonomy of our country, and brave indeed would the superintendent be who would attempt to reestablish the old methods in vogue two or three decades ago. Even those who have been constantly in the work for twenty years are continually surprised at how much liberty can safely be given our charges. It is now the rare exception to find any patient in seclusion, and the older mechanical means of restraint are almost forgotten.

Is that a fair sample of the ordinary treatment, not only in your hospital but in hospitals generally?

Dr. WHITE. Yes, sir, and I have said that very thing, in other words, time and time again.

Mr. SMYSER. I am not quoting from you.

Dr. WHITE. I know you are not, but I say I have said that same thing time and time again myself. I can remember the time, even in my experience, when everybody was harping upon the no restraint. Now I look upon the man who harps upon the no restraint as a man who has nothing else to harp upon. We have got beyond that period.

Mr. SMYSER. Have you any such thing out there as dark cells, doctor?

Dr. WHITE. No, sir; I have never seen one, not in an institution for the insane. I have seen them in prisons. They had dark cells on Blackwell's Island, while I was there, at the workhouse.

Mr. SMYSER. What I read you is from the report of the Massillon State Hospital for the year 1904, by Doctor Eymom.

Dr. WHITE. Yes, sir, and he is very competent to speak upon that subject.

Mr. SMYSER. I have a letter here I want to get off my hands. Doctor, do you know a patient out there by the name of Frank Muellen?

Dr. WHITE. I do not, unless something else recalls him to my mind than merely the name.

Mr. SMYSER. Have you had some correspondence with one Charles Hof in relation to it?

Dr. WHITE. I don't recall it.

Mr. SMYSER. By way of suggestion, so as to aid your recollection, was inquiry made by Mr. Hof into the condition of Mr. Mueller on

account of his sister, who lives in Switzerland, perhaps? Does not that enable you to recall it?

Dr. WHITE. It does not yet; no, sir.

Mr. SMYSER. You may read these letters. I will not put them in the record, but I would like to have you see what you can do for this poor devil. The poor fellow was an old soldier, I take it. I do not know anything about it. You may take those letters along and answer me some other time, if you want to.

Dr. WHITE. All right, sir; I will do that.

Mr. SMYSER. I would rather you would.

The CHAIRMAN. There is one thing I want you to talk about, doctor, that is whether the service in the hospital, so far as the food is concerned, could be improved if you had steam heating tables everywhere where meals are served?

Dr. WHITE. It might be improved slightly, but not to any very great extent. I think the food, as a rule, goes to the tables in very good condition as regards heat, and in other ways. We have steam tables in some places.

The CHAIRMAN. That is in the newer buildings, I suppose, they have put them in, have they not?

Dr. WHITE. No; I think they have no steam tables in any of the newer buildings. The kitchens are all pretty close there. I put in one additional kitchen in one building for the purpose of getting the food in good shape. I put it in R building, where there are so many bedridden cases and sick cases, because there we have largely special diet for the sick, and I wanted the food to get to them in good condition, so I put a kitchen in that building.

I think otherwise the food gets to them in good condition. In some of the buildings where there are no kitchens the food is put into large tin boxes that are asbestos lined and very tight, and it holds its heat very well until it is served, and can be conveyed from building to building in the coldest weather that we have here, which is not very cold usually, and get there in good shape. I have put in in all of the serving rooms of the new buildings, coffee urns so that the coffee would be made hot right there, and would be always hot, surely. I think the food is also served in very good condition as regards its form.

Mr. HAY. Doctor, I have before me a written paper which has been referred to as the Pyles petition. I notice that it is not only signed by Mr. Pyles but by fifty-one others.

Dr. WHITE. It is signed by about that number. I have some recollection of it.

Mr. HAY. What did you do with it?

Dr. WHITE. That petition was handed to a member of the board of visitors, I believe. It is something over two years old now, and I don't know that my recollection is perfect on it; but it was handed to a member of the board of visitors, and the boards of visitors themselves had a special meeting and called all of those men before it and heard their complaints, individually and collectively. They made a report, which I believe I have a copy of with me, and which I will be glad to give you and put in the record.

The CHAIRMAN. Yes; we would like to have that.

Mr. HAY. Yes; how long is it, Doctor?

Dr. WHITE. About three pages.

Mr. BARCHFELD. Let us have it read.

Dr. WHITE. Here is just a formal notice of the fact that the meeting was called, and then here is the report.

(The papers referred to are as follows:)

MINUTES OF SPECIAL MEETINGS OF THE BOARD.

JUNE 7, 1904.

Special meeting of the board was called to-day by order of the president, Dr. Gunnell, to inquire into alleged abuses existing in the hospital, which was specified in a typewritten document, addressed to the board of visitors, but which contained no autographic signatures, and the board could not discover the existence of an original.

Present: Dr. Gunnell, in the chair, Judge Maury, General Moore, Dr. Hamlin, Dr. Magruder, Mrs. Hubbard, and Mrs. Gangewer.

Proceedings of this meeting were ordered to be incorporated in the report to be submitted at the next meeting by Dr. Hamlin, reference to which will indicate fully what was done.

Board adjourned.

WM. A. WHITE, *Secretary*.

JUNE 9, 1904.

A special meeting of the board was called to-day by order of the president to hear report of the recent investigation of the hospital prepared by Dr. Hamlin. Present: Dr. Gunnell, General Moore, Dr. Hamlin, Judge Maury, Dr. Magruder, Mrs. Hubbard, and Mrs. Gangewer. Dr. Gunnell in the chair.

Report was read, one or two alterations were proposed, and as altered was adopted. Copy ordered to be sent to the honorable Secretary of the Interior and to the newspapers.

Report as adopted reads as follows:

"At a special meeting of the board of visitors of the Government Hospital for the Insane, held on the 9th instant, the Reverend Dr. Teunis S. Hamlin, in obedience to a resolution of the board adopted at a previous meeting, submitted the following report of the results of the recent investigation into alleged abuses in the hospital, which was unanimously adopted:

"The board of visitors to the Government Hospital for the Insane met at the hospital on the afternoon of Tuesday, the 7th of June, 1904, and continued in session for five hours. Seven of the nine members were present. Attention was called to the various statements recently published in the city newspapers, some signed and others unsigned, making charges against the management of the hospital. It was also learned that there had come into the possession of the president of the board an undated typewritten document, bearing typewritten signatures of 52 employees of the hospital, and making charges against the management. As this document was unofficial and unauthenticated, it was not laid before the board. Careful inquiry failed to disclose the existence of an original with autograph signatures. There seemed no doubt, however, that 52 names had been signed to this paper."

"Of these 52 signers, ten are probationers, having been in the employ of the hospital less than six months. Eighteen others have entered upon the service there since the death of the former superintendent, Dr. Richardson, on June 27, 1903. Two have asked to have their names taken off the list. Three have been dismissed, one for drunkenness, one for abuse of a patient, and one for conduct unbecoming an employee of the hospital.

"To an invitation extended to all signers to meet the board of visitors and state their complaints 31 responded. A full and free opportunity was given them to speak, of which 13 availed themselves.

"The substance of their statements was as follows:

"1. That the corned beef served was sometimes tainted. They instanced especially that of last Saturday, the 4th instant. Samples of this meat, both raw and cooked, were brought to the board, carefully examined, the cooked sample tasted, and all found to be in perfect condition.

"2. That the steak served is sometimes, or usually, tough. As it requires 700 pounds of steak to supply the hospital for one meal and as the choice portions are reserved for the diet kitchens, round and other less tender cuts must be used for the general tables. The cook in charge of the general kitchen later testified that care is taken to prepare this steak in the best manner, some being broiled and some fried, some well done and some underdone, to suit varying tastes.

"3. That specked potatoes have on one or two occasions been served. This no doubt happened, but as a natural oversight in the poor condition of potatoes at this season of the year.

"4. That boiled potatoes are served in their skins. This has always been the custom at the hospital, as it is in hotels and private houses in many instances.

"5. One or two persons pronounced the tea and coffee weak.

"6. That in some cases an insufficient supply of food was on the table. But when more was sent for from the kitchen, it was always forthcoming.

"7. That in some cases the clothing was inadequate in quality. But on inquiry the clothing was found to be as it has long been, the best being issued only to patients capable of using it properly, while coarser clothing is issued to the disturbed and washable goods, such as jeans, to the very untidy.

"8. That the tobacco ration has been reduced. It has been where the medical officers believed that patients were injuring themselves by excessive use and where untidy patients defiled the wards by promiscuous spitting. The total reduction for these causes has been slight.

"All employees before the board were asked to state whether they had any complaint to make against the general administration of the hospital, and all replies were in the negative.

"Several thought that they should have more pay. This matter was fully discussed by and with the six representatives of the "Hospital Attendants' Protective Union," who later appeared before the board. They objected to one item of the recently adopted scale of wages, and asked that the maximum be increased by \$5 per month. This was ordered by the board. They also asked that in the few cases of temporary reduction in wages effected by the new scale the old rate be restored. This also was ordered by the board. This committee expressed disapproval of the action of those who had prepared and signed the paper hereinbefore alluded to, stating that they had held various conferences with the superintendent concerning wages, and that they had no other questions to present.

"Written reports were received from the storekeepers of the hospital, all of whom have been long in service and some of whom appeared before the board, and were orally questioned, as were the house steward, the head cook, four supervisors, and others, the uniform testimony being that no change in quality or quantity of food has been made by the present superintendent. Waste has been checked in several important directions, but not to the detriment or discomfort of either patients or employees. Complete equality prevails throughout the hospital. For example, butterine has been used for some four years, and is served at the tables of all officers, including the superintendent.

"As the result of this careful and patient inquiry, during which everyone desiring to be heard was given all the time that he wished to state his case, the board found, and now records as its unanimous opinion, that no objectionable change has been made in the hospital by the present superintendent, and that no just ground for complaint exists on the part of either patients or employees.

"And the board affirms that a discipline at once firm and kind must be maintained throughout this great institution, within whose walls are over 3,000 people. The board accordingly calls upon every employee to be loyal and faithful, and declares its purpose to see that the hospital is brought to and kept in the highest state of efficiency and usefulness.

"The board expresses its entire confidence in the business like and efficient administration of the superintendent, and assures him of its cordial support in his efforts to make this institution a model of its kind."

WM. A. WHITE, *Secretary.*

The CHAIRMAN. Was that published in the papers?

Dr. WHITE. It was sent to the papers.

Mr. SMYSER. But was it published?

Dr. WHITE. My recollection is that it was published in whole or in part in at least one paper, but I am not certain as to that.

Mr. HAY. This corned beef—how does it come? Where does it come from? Does it come from Chicago?

Dr. WHITE. Why, it comes—we contract for that just as we do for other supplies.

Mr. HAY. I think the purchasing agent said that was contracted for with Swift.

Dr. WHITE. It is usually a different person every year.

Mr. HAY. Looking at the recent disclosures of the packing houses, it is not out of the question that that beef may have been tainted, is it?

Dr. WHITE. It is out of the question only in this way, that every piece of that corned beef is inspected when it comes into the hospital and if there is anything the matter with it it goes back. We have a man who does that particular work.

Mr. HAY. Who is this inspector?

Dr. WHITE. He is the so-called house steward.

Mr. HAY. What is his name?

Dr. WHITE. Mr. French. We have two or three Frenches there. He has been there twenty-five years, I guess. Every piece of that meat is inspected.

Mr. BARCHFELD. Your contract with the beef company is such that when goods come in that are not up to the standard you return them?

Dr. WHITE. Absolutely.

Mr. BARCHFELD. So that there is no loss to the institution?

Dr. WHITE. No loss at all.

Mr. BARCHFELD. And there is no reason why you should serve unhealthful or tainted beef?

Dr. WHITE. There is no reason at all. The contract is very general in its wording, and it provides that satisfactory meat must be supplied. We not only have specifications but the general terms of the contract provide that a satisfactory article must be supplied.

Mr. HAY. Does this beef come in cans, this corned beef?

Dr. WHITE. No, sir; it is not canned.

Mr. HAY. It is not canned?

Dr. WHITE. No.

Mr. HAY. I notice that one of the charges in this petition was that these soldiers are hustled from the path of people who come there to see them.

Dr. WHITE. They are what? Hustled?

Mr. HAY. That these soldiers are hustled from the path of people who come there to see them, these visitors—not the board of visitors, but visitors.

Dr. WHITE. No, they are not; there is no reason for doing any such thing as that.

Mr. HAY. I understand that; but you stated that this matter had never been brought to your attention until this investigation?

Dr. WHITE. I never heard of it.

Mr. HAY. This petition which you say was investigated by the board contains this charge.

Dr. WHITE. Then my memory did not serve me.

Mr. HAY. I just wanted to call your attention to that fact——

Dr. WHITE. I do not think I read that.

Mr. HAY. To ascertain whether or not that matter had been looked into by the board of visitors, the result of which you have just read

Dr. WHITE. I have no recollection other than the report I have just read. I have not read that petition since that time, two years ago. Mr. Oflutt hands me a note, which would perhaps be information for you. He says the corned beef we get now is from Golden & Company, here in the city, and is killed in Virginia, so that it does not come from one of the large packing houses.

Mr. SMYSER. Now, will you be good?

Mr. HAY. No; it has absolutely nothing to do with it. In 1904, when this complaint was made, where did it come from?

Dr. WHITE. I do not remember.

Mr. HAY. As the result of this complaint, you have been getting it in Virginia, maybe?

Dr. WHITE. No, not at all; we get it by contract. I think we have been getting it from this firm right along, but I am not sure.

The CHAIRMAN. As a matter of fact, during the time you have been superintendent, the corned beef has been served by people who have obtained the contract from the Department of the Interior, after proper advertisement?

Dr. WHITE. Yes, sir; that has been done in the hospital for many, many years.

Mr. HAY. The board of visitors did not allow Mr. Pyles to testify, did they?

Dr. WHITE. He had been discharged at that time.

Mr. HAY. Do you use any canned beef at all there?

Dr. WHITE. We get some canned beef; yes, sir.

Mr. HAY. Where does that come from?

Dr. WHITE. I think the contract has been with the large packing houses—I do not remember which one, but usually with Armour, or Schwarzschild & Sulzberger Company, or Morris.

Mr. HAY. Some of the big packing houses?

Dr. WHITE. Yes.

The CHAIRMAN. I think that is all, Doctor.

Mr. WALLACE. I would like to ask a few questions.

The CHAIRMAN. Go on, Mr. Wallace. I did not mean to cut anybody off.

Mr. WALLACE. Doctor, on pages 12 and 13 of your report for 1905, you have a detailed list of products from the farm and garden, including dairy and poultry yard, but no values are stated. Could you prepare and file a statement in detail of the wholesale market value of these products at that time, so that it may go into the record in connection with your testimony? (Report printed as a public document.)

Dr. WHITE. I presume that could be done. It would be a great task to go back over the market reports a year and a half ago. I presume it is a possible thing to do.

Mr. WALLACE. You have nothing of the kind with you now that you could produce?

Dr. WHITE. No, sir.

Mr. WALLACE. On page 13 of your report I find listed as part of the farm products 1,128 tons of hay, fodder, ensilage, oats, and so forth. What disposition did you make of this 1,128 tons of provender? Have you any recollection about it?

Dr. WHITE. I presume that went to the cows and to the stock generally.

Mr. WALLACE. On page 12 you report raising 230 barrels of corn in the ear. What disposition was made of that?

Dr. WHITE. It was used to feed the stock.

Mr. WALLACE. Please state, approximately, the wholesale value of this hay, fodder, corn, etc.

Dr. WHITE. I can not do that.

Mr. WALLACE. You can not state the lump sum?

Dr. WHITE. No; I could only guess at it. I can not tell you.

Mr. WALLACE. I see, on page 30, expenditures noted on the farm account of \$12,204 for feed and \$8,866.71 for hay and straw, making a total of \$21,070.71 expended in addition to what you have raised. Do you not think, doctor, that your feed bill for 150 cows and 48 horses and mules has been somewhat extravagant?

Dr. WHITE. I should have to figure on it. I do not suppose it would be.

Mr. WALLACE. From those figures there?

Dr. WHITE. I do not think so.

Mr. WALLACE. On page 6 of your financial report, under the head of "Farm, Garden and Stable," and subhead of vehicles and repairs, there appears an expenditure of \$2,579, dated August 8, 1904, voucher 1373, favor of Electric Vehicle Company. Was this for the purchase of an automobile or touring car?

Dr. WHITE. What is the amount?

Mr. WALLACE. Twenty-five hundred and seventy-nine dollars, August 8, 1904.

Dr. WHITE. I think probably that item was included there, but I can not recall it. I presume it was.

The CHAIRMAN. Did you say a touring car?

Dr. WHITE. No, it was not a touring car; it was an automobile, not a touring car. We have not any touring car there.

The CHAIRMAN. I was wondering if you could get one for \$2,500.

Mr. WALLACE. What is the carrying capacity of the two conveyances you have for the patients to ride in? How many people do they carry?

Dr. WHITE. We have one that carries about 15 and one that carries about 8 patients that we take out driving, and use regularly—park wagons.

Mr. WALLACE. How many trips a day do they make? You stated, I believe, that they make two?

Dr. WHITE. They make two trips a day, both of them.

Mr. WALLACE. How often would that give the patients an outing—a ride or a drive?

Dr. WHITE. Of course, we do not take all the patients out.

Mr. WALLACE. No, you could not take out all of them, of course. A great many of them could not go.

Dr. WHITE. I think that gets around to the different services at least once a week, and I do not know but that it is oftener than that, and takes out such patients as we think would be benefited by such an outing.

Mr. WALLACE. Do you think it would have been more to the interests of the hospital work to have expended that \$2,579 for more vehicles for the benefit and enjoyment of the patients?

Dr. WHITE. I do not think so; no.

Mr. WALLACE. Speaking of the laundry and the foreman of the laundry, did he recommend the purchase of the new laundry outfit or machinery?

Dr. WHITE. Naturally, when I came to enlarge the laundry, I consulted the laundry man somewhat. The plans for the whole arrangement were practically my own. I did that work myself.

Mr. WALLACE. Do you know when it was purchased, and from whom?

Dr. WHITE. Why, we did the additional building ourselves, and the laundry machinery was purchased, I think, from more than one firm. It was purchased on competitive bids. I was going to say, with regard to the purchase of material, I purchase a great many things which are not contracted for. Naturally there are a great many things coming from the repairs and improvements which can not be

foreseen, and which I arrange for; and all that work is done largely through the Interior Department. We have recently made a number of additional contracts. For instance, if I want to buy some bricks, or get competitive bids, we invite the bidders and get the competitive bids, and the Department prepares a form of contract, and the bricks are purchased under that contract. Where the expenditure is a flat expenditure and one that is not going to extend over any time, we invite competitive bids, and then, after the bids are all in and I make up my mind as to what I want, I prepare a letter to the Department and get authority for the expenditure; and every expenditure that is made in the hospital in that way, that amounts to anything at all, is done after communication with the Department and after the receipt of authority from the Secretary. I do not think there has been a purchase made in any other way that amounted to anything at all.

Mr. WALLACE. Is this new machinery in actual use?

Dr. WHITE. Some of it is, but not all, as I just testified. The installation was not completed.

Mr. WALLACE. There is a new air-brake, I believe, doctor, that you bought perhaps something over a year ago, for the locomotive. Has this been attached by the chief engineer?

Dr. WHITE. Yes; it is in use, sir.

Mr. WALLACE. Is it true, or not, that during the temporary absence of Mr. Luckett, locomotive engineer, last fall, Mr. Folsom undertook to run the locomotive and lost control of it and injured the tubes of the engine, causing them to leak?

Dr. WHITE. I have no recollection of any such thing.

Mr. WALLACE. Was any other patient besides Brown and Kellogg scalded in a similar way that Brown was, do you know?

Dr. WHITE. No, sir.

Mr. WALLACE. Doctor, can you tell about how many Sundays you spent at the hospital in 1904 and 1905, approximately?

Dr. WHITE. No, I can not; but I am usually there Sundays, at least during the forenoon. I sometimes go out in the afternoon.

Mr. WALLACE. Have you had a habit of leaving Saturday and returning Sunday or Monday?

Dr. WHITE. Not a regular habit; no, sir. I have done such things.

Mr. WALLACE. There is something I want to ask you, doctor. On page 13 of Doctor Richardson's report for 1901, he speaks of a \$25,000 stable in process of erection on the east side of Nichols avenue, with accommodations for 60 horses and mules, and all necessary carriages and farm wagons. Is that one of the buildings you desire to tear down and replace?

Dr. WHITE. No, sir.

Mr. WALLACE. That is not one of them?

Dr. WHITE. No, sir.

Mr. WALLACE. On page 12 of his report he states, "In the renovation of the dairy barn, a large amount of labor has been expended. The floors, including girders and joist have been renewed, and the feed troughs partitioned, so that no one cow can contaminate another through this channel. A silo, holding almost 200 tons of ensilage, has been constructed and filled for winter feeding;" and further on he states, "On the home farm are commodious and comfortable barns for winter use."

Dr. WHITE. On what farm?

Mr. WALLACE. On the home farm.

Dr. WHITE. I do not know what that is. I do not know what he means by "the home farm."

Mr. WALLACE. I guess his report would show. I am taking that statement from the report. I suppose there is only one farm up there, one big farm, belonging to the institution?

Dr. WHITE. There is one big one and one small one, sir.

Mr. WALLACE. Perhaps if I ask this further question you can understand that. Is it this dairy barn, renovated by Doctor Richardson, that you desire to tear down and replace?

Dr. WHITE. I presume so. I do not know what he means by "home farm," but I presume so. The barn has been there a great many years?

Mr. HAY. The quotation is from the report of 1901, as I understand it?

Mr. WALLACE. Yes. Is it for necessary practical utility that you want to tear down the old barns and build new ones, or for architectural and landscape improvement?

Dr. WHITE. It is for no particular landscape improvement. The barns are rather dilapidated, and one of them is in very bad shape as regards repair, and it ought to come down. It would be very poor economical procedure to put one barn in one place and the other one half a mile off, and try to take care of the dairy in that way, and so I want to locate the whole plant in a different place.

Mr. WALLACE. So that does include something of architectural improvement?

Dr. WHITE. No, not architectural improvement. I have not that in mind. Of course, when we build a barn we want a decent looking one, naturally. It does not cost any more to do that than it does to build a homely looking affair.

Mr. WALLACE. Is it contemplated by you in asking for \$51,000, for this purpose, to purchase additional land for the "New site" that you speak of, through Mr. Samuel Bieber, or other person?—

Dr. WHITE. No, sir.

Mr. WALLACE. On which to erect these new barns, stables, pig-gery and hennery?

Dr. WHITE. No, sir.

Mr. WALLACE. In regard to the food, Doctor, will you state positively that the old soldiers of Garfield, Dawes and the Atkins' Hall group, have been better fed, previous to this investigation, than have the inmates of the Almshouse and Washington Asylum Hospital of this city?

Dr. WHITE. Are they better fed?

Mr. WALLACE. Yes.

Dr. WHITE. I have never been to the Washington Asylum Hospital, nor to the Soldiers' Home.

Mr. WALLACE. Then you do not know about those institutions?

Dr. WHITE. Except what people have told me, and from what they have told me I think they are better fed and have been right along.

Mr. WALLACE. From what has been told you you think that?

Dr. WHITE. Yes, sir.

Mr. WALLACE. Doctor, there is a little explanation that perhaps you would like to make here. The New York Medical Journal has been offered and accepted here as an authority on insanity questions. If that journal says that the use of strait-jackets and similar restraints are obsolete and not used in advanced practice of these days, is that journal mistaken?

Mr. SMYSER. How is that?

Mr. WALLACE. The New York Medical Journal has been offered and accepted here as an authority on insanity questions. If that journal says that the use—we have it here, “of strait-jackets,” but it would be the camisole, as the doctor terms it in his institution, if that journal says that the use of the camisole and similar restraints are obsolete and not used in advanced practice of these days, is that journal mistaken?

Dr. WHITE. In the first place, neither the New York Medical Journal, nor any other journal, can be an authority on anything medical. It simply publishes what the various writers have to say, and what they may or may not say—

Mr. WALLACE. That is not a standard authority, then?

Dr. WHITE. No journal can be an authority on anything. It merely publishes the views of individuals, and they say that the strait-jacket is obsolete. They do not say that the strait-jacket is a camisole, and I can say that I never have seen a strait-jacket except once, on exhibition at Chicago.

Mr. HAY. You do not think the editorials of these journals are authority, do you?

Dr. WHITE. Certainly not; they constitute no authority. They represent merely the individual opinion of the editor.

Mr. HAY. What does constitute authority?

Dr. WHITE. That is a legal question.

Mr. HAY. In court, you know, the decisions of a court of last resort, with us, constitute an authority.

Dr. WHITE. There is not any such thing as constituted authority in medicine or science.

Mr. HAY. It is a thing that is always left to one's own opinion at last?

Dr. WHITE. Absolutely. When an expert is testifying, his opinion as far as that is concerned is authority, so far as his evidence is concerned.

Mr. HAY. But you have no authority as we have in the law?

Dr. WHITE. There is absolutely no such thing in any department of science. Some men are recognized as being competent to give authoritative utterances.

Mr. SMYSER. But you have standard authorities, recognized by the profession?

Dr. WHITE. Yes; but in any controversy any statement they make may be considered authoritative or not, as the case may be. In the last analysis it is nothing more than their opinion, and has no value as an authority in the way that a court of last resort has in legal procedure.

Mr. HAY. It is nothing more than the opinion of one man at last?

Dr. WHITE. It is nothing but his opinion.

Mr. WALLACE. They are like the text books in law?

Dr. WHITE. They are the opinions of the individual writers.

Mr. WALLACE. Like Greenleaf's book on Evidence?

Dr. WHITE. That is his opinion on the question of evidence.

The CHAIRMAN. It comes down to the question of the value of expert testimony as to whether the book that one man writes is better than a book that another man writes. It is his particular opinion.

Dr. WHITE. It is his particular opinion, of course, and as to the issue of fact, it rests with the jury to determine.

Mr. SMYSER. There is not much certainty, then, in your profession?

Dr. WHITE. There is not.

The CHAIRMAN. There is no constituted authority which the lower courts are bound to follow, either as a matter of precedent or because of decision by the higher court?

Dr. WHITE. There is absolutely no such thing in any department of science.

Mr. WALLACE. Did your expert accountant look over all of the purchases? Have you had an expert accountant at the institution?

Dr. WHITE. No, sir; the purchasing agent does that.

Mr. WALLACE. That is, the purchasing agent?

Dr. WHITE. The accounts are all audited by the Auditor for the Interior Department in the Treasury Department.

Mr. WALLACE. You do not have an expert accountant at your institution?

Dr. WHITE. I have an expert accountant; yes, sir.

Mr. WALLACE. He does not look over those himself?

Dr. WHITE. He has been busy since he has been there on special problems which I have given him, the principal one being the instituting of the cost-account system.

Mr. WALLACE. Is there any difference of opinion between the Secretary of the Interior and yourself relative to the best financial methods for the hospital?

Dr. WHITE. The Secretary has thought that the funds of the hospital should be disbursed by a disbursing officer in the Interior Department. I do not think so. It is entirely a friendly difference of opinion.

Mr. SMYSER. Right in that connection, I have been asked to ask you this question, and this is as good a place as I will ever get. The Secretary of the Interior has recommended the disbursement of money through the disbursing officer of the Interior Department?

Dr. WHITE. He has, yes, sir; in the past.

Mr. SMYSER. And you have opposed that view?

Dr. WHITE. I have opposed it solely upon the basis that I did not think it was the best way to do.

Mr. SMYSER. That is what I wanted to ask you. As an administrative officer of that institution you think the disbursing officer ought to be there.

Dr. WHITE. I think the disbursing officer ought to be there at the institution. There is no question about that in my mind, from my experience.

Mr. HAY. What are your reasons for that, Doctor?

Dr. WHITE. The principal reason is this: Suppose the moneys are disbursed at the Interior Department. I have all to do with the spending of the money. Suppose I want to know what the balance is on a certain appropriation. I do not know how those accounts

have been adjusted by the auditor with the disbursing officer, and I have either got to go down to the Department to find out, or find out the balance of money in the official correspondence. Under the present conditions I can walk across to the financial room and find out the balance in thirty seconds.

In a recent experience with the disbursing officer of the Interior Department—and I do not say this in a spirit of criticism, but as a matter of fact—he disbursed some funds of the hospital, and it resulted in my being in official correspondence with the Treasury Department and Interior Department for a period of two years, to find out what the balances were, and I do not know yet. I do not want to have any such things as that occur with reference to the disbursements of that institution. They got into a mix up, and I think I knew what the mix up was, but I could not make them believe that was it.

Mr. HAY. Did you ever have any business with the Comptroller of the Treasury?

Dr. WHITE. I remember of frequently submitting questions through the Department to him for decision. Of course I have to. Every disbursing officer has to do that. I think the hospital should have a disbursing officer, but I think he should be a resident officer of the hospital, and should have his office there, and keep his books there. That opinion of mine was the opinion of Dr. Richardson. That was the opinion of Dr. Godding; and I do not know why, but perhaps in deference to that constant and unchanging opinion of every Superintendent the Secretary this past year did not recommend that transfer. I think certainly the hospital should have a disbursing officer, but I think he should have an office and keep his books there in the hospital.

Mr. HAY. Do you think you should be the disbursing officer, or that there should be some other man?

Dr. WHITE. I think there should be a special disbursing officer for the hospital. I think I should be relieved of the immediately fiscal responsibility.

Mr. WALLACE. Just two or three more questions, Doctor. I want to ask you something about the inclosure out there, about the Atkins Hall group, for the old soldiers—the “Bull pen,” if you understand the term alluded to there.

Dr. WHITE. Yes, sir.

Mr. WALLACE. Could you, with the number of acres you have at your disposal, provide a larger ground or open space for them?

Dr. WHITE. Not conveniently, considering the construction we expect to put into operation there. I do not think we could, and I do not think there is any necessity for it. I think it is large enough.

The CHAIRMAN. Is that the “Bull pen”?

Dr. WHITE. Yes.

Mr. SMYSER. I wish you would call it by that name, Mr. Wallace, because then I can remember it.

Mr. WALLACE. All right. Is there any reason why these old soldiers could not be located in cottages or comfortable barracks on one of the hospital tracts, giving them 100 acres or more, where they could indulge in competitive cultivation of garden plats, raise chickens or hold camp fires, or indulge in some other employment or recrea-

tion, that is not now afforded them by the dull routine of the cramped quarters of the so-called "Bull pen?"

Dr. WHITE. I suppose they might tear down the whole institution, and build another one.

Mr. WALLACE. I think the object of this question is to know whether the space could not be enlarged, so as to give them more exercise, and in different ways, you know, as suggested.

Dr. WHITE. I do not think there is any object in enlarging that inclosure. The reason for having that inclosure is to give a lot of people provisional parole. We put people there who have the privilege of the park, but who are not proper persons to have the full privileges of the grounds, for various reasons. Among others, the epileptics are there. If the epileptics were in cottages where there was no inclosure of that sort for them, they would have to have the full privilege of the grounds or no privilege at all, and the result would be that they would not have any privilege. So they are much better off there than they would be under other conditions.

Mr. WALLACE. Do you think that that space, as arranged there for them, is all-sufficient for their mental condition, and so forth?

Dr. WHITE. I think it is a most admirable arrangement for them.

Mr. HAY. Have you a railroad out there?

Dr. WHITE. Yes, sir.

Mr. HAY. You do run a railroad?

Dr. WHITE. Yes, sir; about three-quarters of a mile.

The CHAIRMAN. What does it connect with?

Dr. WHITE. It connects with the Baltimore and Ohio Railroad.

The CHAIRMAN. Is it all under the same management?

Dr. WHITE. Yes.

Mr. SMYSER. That is for the convenience of the hospital?

Dr. WHITE. Yes. I do not know how long it has been there, but it is an absolute necessity, I think. I do not know how we could get our coal in if we did not have it. In the old days they used to cart the coal in wagons. Our contract this year for soft coal is for 18,000 tons, and it would be a terrific operation to bring that up in wagons; and in the present condition of the boiler house it could not be done without building roads. Now that we have a railroad we bring the cars up to the doors and dump it into the coal buckets, from which it is shoveled into the boilers.

Mr. HAY. Who is the engineer who runs the railroad under you?

Dr. WHITE. The chief engineer has charge of the railroad. He looks after the power, heating, and lighting plant, and the plumbing, and all the engineering part of it; and there is a locomotive engineer, Mr. Luckett, whose sole business is to run the locomotive.

Mr. HAY. The chief engineer, or whatever you call him——

Dr. WHITE. Yes, the chief engineer.

The CHAIRMAN. Can you have him here to-morrow?

Dr. WHITE. Yes, sir.

Mr. HAY. And the farmer?

The CHAIRMAN. Yes, I would like to have the farmer, undoubtedly.

Mr. HAY. And the carpenter? Something has been said about a renewal of some of the floors there in the buildings which have just recently been constructed. I want to ask him about that.

Dr. WHITE. I can tell you something about that.

The CHAIRMAN. I wish you would tell us about that.

Dr. WHITE. Several of the floors in the main building, or rather portions of them, did rot out by a process of what is usually known as dry rot. I do not know, and I do not know that anybody has fathomed the cause of that. The floors are pine floors, which are laid upon steel beams and cement—fireproof construction. The floors are laid upon the steel and cement, and there are occasional 2 by 4's put in the cement, to which the pine boards are nailed. I believe that is the construction. Some of these did rot out, but the contractors who put up those buildings were under bond, and that bond carried complete responsibility for their construction for a year after the buildings were accepted. So that any repairs that had to be made to the construction within a year could be made good under the bond; but this has all been done subsequent to that time. There was a construction there amounting to a million and a half dollars, and I doubt if the renewal of the floors has amounted to two thousand dollars since that time.

Mr. HAY. They had to replace them, did they?

Dr. WHITE. No; we had to do it. It was done after the expiration of the bond. It was a very, very small thing in that amount of construction.

Mr. HAY. How many heads of departments are there, doctor? I think you stated, but I have really forgotten.

Dr. WHITE. I can not give you the number. We have a farmer, who looks after the farms. Then——

Mr. HAY. We do not want any that we have already examined, you know.

Dr. WHITE. No, sir. Then we have the chief engineer, who looks after the power, heating, and lighting plant, and all the things that properly belong to that department, such as plumbing.

Mr. HAY. And you have a man who inspects the food?

Dr. WHITE. We have the man who looks after the food—the house steward; and then we have the——

Mr. HAY. The man who is in charge of manufacturing clothes?

Dr. WHITE. Yes, sir; the clothing room, the mending room, the laundry, the storeroom, the carpenter department.

Mr. HAY. There are about five or six there, I suppose?

Dr. WHITE. Yes; there are more than that, I suppose.

The CHAIRMAN. Is Mr. Maenche around where we could get him? I would like to examine him.

Dr. WHITE. He is still away. He wrote me that he would be back probably this week sometime. He said he was feeling very much better.

The CHAIRMAN. Whereabouts is he? Here in the city?

Dr. WHITE. No; he went somewhere in Massachusetts. I have his address and will write him or telegraph him to come right back, if you desire.

The CHAIRMAN. I do not think that is necessary if he is going to be here in a week. We will be here certainly for a week yet. I will want him when he comes back.

Mr. WALLACE. Do you pay any demurrage, Doctor?

Dr. WHITE. We have to, sometimes. Occasionally an accident happens. Recently they had an accident to the track which held up traffic, and it necessitated the paying of some demurrage.

Mr. WALLACE. Do you remember anything about the amount?

Dr. WHITE. It was about \$125. That was the last bill of demurrage we paid. It was due to the sliding of the track during the long spell of wet weather that we had.

Mr. WALLACE. Does that occur frequently?

Dr. WHITE. We have had a great deal of trouble with the track, and it has slid on a number of occasions. We have done all sorts of things to it and tried to fix it, and we do not know when we are going to succeed in getting it so that it will "stay put." We are keeping at it all the while.

Mr. HAY. Will you give the names of those people to the sergeant-at-arms?

Dr. WHITE. There are the farmer, the head carpenter, the chief engineer—

The CHAIRMAN. That will be enough for to-morrow, I guess.

Dr. WHITE. Do you want the house steward?

The CHAIRMAN. Yes, sir.

The committee (at 4.10 o'clock p. m.) adjourned until to-morrow, Tuesday, June 5, 1906, at 10 o'clock a. m.

HOUSE OF REPRESENTATIVES, *June 5, 1906.*

The committee met at 10 o'clock a. m.

Present: Messrs. Olcott (chairman), Smyser, Hay, and Wallace; also, Dr. White, Mr. Evans, Dr. Emmons, and others.

TESTIMONY OF JAMES L. GREEN.

JAMES L. GREEN, being first duly sworn, was examined and testified as follows:

Mr. SMYSER. What is your name in full, Mr. Green?

Mr. GREEN. James L. Green.

Mr. HAY. Mr. Green, you have charge of the farm at St. Elizabeth's?

Mr. GREEN. Yes, sir.

Mr. HAY. Do you keep any books to show how much the farm costs per year?

Mr. GREEN. Yes, sir.

Mr. HAY. Have you those figures with you?

Mr. GREEN. No, sir; it is all kept in the storeroom book. We turn in everything to the storeroom.

Mr. HAY. Who has charge of that?

Mr. GREEN. Mr. French and Mr. Sanger, I think.

Mr. HAY. How many hands, outside of patients, do you employ on the farm?

Mr. GREEN. All told, about twenty.

Mr. HAY. Outside of the patients?

Mr. GREEN. Outside of the patients.

Mr. HAY. What do you pay those hands?

Mr. GREEN. The lowest man is paid \$20. It runs from \$25 up to \$32.50. Two, I think, get that.

Mr. HAY. I suppose you not only pay them but they get their board?

Mr. GREEN. They are boarded. Most of them, though, stay home at night.

Mr. HAY. They stay at their homes at night?

Mr. GREEN. Yes, sir.

Mr. HAY. How many hands do you employ at \$32?

Mr. GREEN. Only two, sir.

Mr. HAY. Two at \$32 a month?

Mr. GREEN. Yes, sir.

Mr. HAY. How many at \$25?

Mr. GREEN. The rest of them are \$25, all except one. There is seventeen.

Mr. HAY. Seventeen at \$25 a month, two at \$32 a month, and one at \$20 a month?

Mr. GREEN. Yes, sir.

Mr. HAY. You work how many horses on the farm?

Mr. GREEN. We work nineteen on the farm this year.

Mr. HAY. Fourteen horses and five mules?

Mr. GREEN. Yes, sir.

Mr. HAY. How much of that farm, Mr. Green, is in grass, how much in corn, and how much in wheat, if there is any wheat?

Mr. GREEN. We raise no wheat. We raise mostly truck vegetables. We raise corn for the siloes.

Mr. HAY. How much have you in corn for the siloes this year?

Mr. GREEN. We will have about 50 acres.

Mr. HAY. And how much in grass?

Mr. GREEN. I suppose we will have about 50 acres in grass.

Mr. HAY. How much in truck?

Mr. GREEN. We have about 60 acres, I guess, in different stuff.

Mr. HAY. That is 110 acres, then, that you have under cultivation?

Mr. GREEN. Yes, sir. Then there comes in the roasting ears, you know. We generally raise about 10 or 12 acres of roasting ears for the house.

Mr. HAY. Ten or 12 acres?

Mr. GREEN. Yes, sir; then some of this land we get two crops off it. We cut the rye off and then we seed with cow feed.

Mr. HAY. How much ensilage do you put up?

Mr. GREEN. About 500 tons. We use about 500 tons in a season.

Mr. HAY. They are used for the cows, are they?

Mr. GREEN. Yes, sir; they are used exclusively for the dairy cows.

Mr. HAY. You do not raise any feed on the farm at all for the horses, do you?

Mr. GREEN. We raise timothy hay. What timothy we have goes to the horses.

Mr. HAY. Is the timothy hay you raise sufficient to feed those horses?

Mr. GREEN. No, sir.

Mr. HAY. So that you have to buy feed for the horses outside of what you raise?

Mr. GREEN. Yes, sir.

Mr. HAY. What do you feed your horses on—corn or oats?

Mr. GREEN. Oats, mostly.

Mr. HAY. You do not raise any oats, do you?

Mr. GREEN. No, sir; we raise oats for the silo, green wheat, rye, and grass. We cut that all during the season and haul it in every day.

Mr. HAY. What I mean is that the oats you feed the horses are not raised on the farm?

Mr. GREEN. No, sir.

Mr. HAY. How many bushels of oats do you consume a year?

Mr. GREEN. We use about 150 bushels every eight days and 3 gallons to a horse a day—something like that.

Mr. HAY. Do you mean that is for the horses worked on the farm?

Mr. GREEN. For the horses all told.

Mr. HAY. But I am talking about the 19 horses you work on the farm now.

Mr. GREEN. The feed is all bought in a lump, you know.

Mr. HAY. You use 3 gallons a day for each horse?

Mr. GREEN. Yes, sir.

Mr. HAY. There are 19 horses, and that would be 57 gallons a day for those 19 horses?

Mr. GREEN. Yes, sir.

The CHAIRMAN. What do you mean by a gallon of oats.

Mr. GREEN. That is half of a peck.

The CHAIRMAN. I never heard of a gallon of oats before. They never use any such expression in my country. We talk about pecks and bushels.

Mr. GREEN. You take some of these people that work horses and they give the horses nearly a peck, they are liable to give them a peck.

Mr. HAY. How much hay and other long feed do you have to buy in addition to what you raise on the farm for the 19 horses?

Mr. GREEN. Well, say 12 pounds of hay a day.

Mr. HAY. Twelve pounds of hay a day to a horse?

Mr. GREEN. Yes, sir.

Mr. HAY. That is 128 pounds a day.

Mr. GREEN. Yes, sir; and say we raise a hundred tons of timothy hay, that is fed to the whole lot all together. We keep nothing separate like that. There is 58 horses all together.

Mr. HAY. With those 19 horses you use on the farm, how much hauling do you do in the way of hauling ice, for instance.

Mr. GREEN. We haul all the freight.

Mr. HAY. You haul all the freight with those 19 horses?

Mr. GREEN. We haul the freight from the city, backward and forward. We unload the cars that come with sugar and stuff like that for the house.

Mr. HAY. Do you haul ice.

Mr. GREEN. No, sir; there is horses separately for that that work on the walks and grounds.

Mr. HAY. These 19 horses are not used for anything except the plowing and hauling?

Mr. GREEN. Plowing and hauling anything from the buildings. Any moving of furniture, or anything like that, we do.

Mr. HAY. Mr. Green, there has been an estimate put in here to the effect that you clear on that farm \$9,000 a year

Mr. GREEN. Yes, sir.

Mr. HAY. That is a very fine farm. I wish I could make that much money on a farm.

Mr. GREEN. That is truck stuff, most of it. All of it is green stuff, you know. If you take the same land and raise it in field wheat and corn, and you wouldn't get that profit from it.

Mr. HAY. No; I think not.

Mr. GREEN. I worked land on the Rappahannock River in Virginia, where land is fine——

Mr. HAY. Are you from Virginia, Mr. Green?

Mr. GREEN. Yes, sir. With all our work, I weigh all the coal and look after unloading all the coal for house along with my farm work. We get in somewhere near 18,000 tons of coal.

Mr. HAY. I hold in my hand, Mr. Green, the report made last year showing what was raised on the farm, and see that you raised 262 tons of timothy hay.

Mr. GREEN. Yes, sir.

Mr. HAY. Green wheat, 20 tons.

Mr. GREEN. Yes, sir.

Mr. HAY. These cows, I presume, are fed, so far as the products of the farm will go, on what you raise on the farm?

Mr. GREEN. Yes, sir; it all goes to the cows—all green feed.

Mr. HAY. The rye goes to them, too?

Mr. GREEN. Yes, sir.

Mr. HAY. How much ensilage corn do you raise?

Mr. GREEN. About 500 tons, sir. That is, close on to it. We put in 400 tons, and the other we fed along during the fall while we was filling the siloes.

Mr. HAY. How do you estimate the value of the different truck you raise?

Mr. GREEN. Our truck we turn in every day to the storeroom and they take it at the market price of it.

Mr. HAY. Do you raise truck enough on the farm for the use of the hospital during the season?

Mr. GREEN. No, sir; we raise it all during the season.

Mr. HAY. I know you do, but do you raise enough for the use of the hospital?

Mr. GREEN. No; we don't raise a sufficient quantity. We have to buy some.

Mr. HAY. You buy outside?

Mr. GREEN. Yes, sir.

Mr. HAY. Do you know how much you have to buy?

Mr. GREEN. No, sir.

Mr. HAY. Outside of the paid hands, how many other hands have you on the farm?

Mr. GREEN. No other hands.

Mr. HAY. Don't you work some of the patients?

Mr. GREEN. Only the patients, sir.

Mr. HAY. How many do you have there?

Mr. GREEN. We have, I suppose, 25 patients around at different places.

Mr. HAY. What sort of work do they do, Mr. Green?

Mr. GREEN. They handle the manure, work it over, spread it.

Mr. HAY. What sort of hands do they make?

Mr. GREEN. Some of them are pretty good and some of them don't do much. Our best help is all going now. The men are getting old, and we haven't got so good a class of patients as we had in former years.

Mr. HAY. The farm implements are bought under the direction of the superintendent, I presume?

Mr. GREEN. Yes, sir.

Mr. HAY. You have nothing to do with them?

Mr. GREEN. If we need anything, we get an order for it.

Mr. HAY. Your horseshoeing—is that done on the place?

Mr. GREEN. Yes, sir; all the horseshoeing is done at the hospital.

Mr. HAY. I see that last year you paid out for feed about \$21,000?

Mr. GREEN. Yes, sir.

Mr. HAY. And that included the feed for all the horses and all the cows?

Mr. GREEN. Yes, sir.

Mr. HAY. You buy manure outside, too, do you not?

Mr. GREEN. We buy a little fertilizer, but only a small quantity of manure, sir.

Mr. HAY. What kind of fertilizer do you buy?

Mr. GREEN. Different kinds. We generally get phosphates and mix them ourselves.

Mr. HAY. So that these cows that furnish three gallons of milk every day are not fed entirely from the products of the farm?

Mr. GREEN. No, sir. We buy all the grain for them, the meal, and bran.

Mr. HAY. Do you know how much that costs?

Mr. GREEN. Sir?

Mr. HAY. Do you include in the item of feed the item of meal and corn?

Mr. GREEN. Meal and flaxseed, we use.

Mr. HAY. That is included in this item of \$21,000?

Mr. GREEN. Yes, sir; it is all included in that.

Mr. HAY. You don't raise any hogs?

Mr. GREEN. We have been raising hogs, but we had to do away with them.

Mr. HAY. On account of the cholera?

Mr. GREEN. Yes, sir. Year before last we killed 52,000 pounds of pork.

Mr. HAY. Could you not raise hogs there to advantage if you had a proper place to keep them?

Mr. GREEN. If we had a proper place to keep them, but the place we have is not the proper place to raise hogs. We had bad luck with them. Every now and then the cholera breaks out.

Mr. HAY. Is there no place on the farm that you could use for that purpose?

Mr. GREEN. Yes; if we had a place built.

Mr. HAY. I mean is there not a place on the farm where they could be raised and where you could get the proper place to raise them?

Mr. GREEN. Yes, sir; they could be moved back from the public road.

Mr. HAY. Is it not an advantage also on a farm to have hogs?

Mr. GREEN. Nothing pays any better, sir; where you have the feed for them, like we have there.

Mr. HAY. Are you contemplating raising any more hogs?

Mr. GREEN. We pay good prices for hogs to breed from, and then if you lose them all by the cholera it is kind of disheartening.

Mr. HAY. The Department of Agriculture say now they have found something that will cure hog cholera and keep it off entirely.

Mr. GREEN. Yes; so they say.

Mr. HAY. That is what I say, so they say.

Mr. GREEN. They recommend all kinds of remedies and we have tried everything.

Mr. HAY. How many hogs could you raise there?

Mr. GREEN. We could raise six or eight hundred hogs, sir.

Mr. HAY. That would be a large saving, would it not?

Mr. GREEN. Yes, sir.

Mr. HAY. You do not undertake to feed, I suppose, any cattle or anything of that sort?

Mr. GREEN. We raise any we have, but we have no pasture?

Mr. HAY. You have no grass land?

Mr. GREEN. No, sir.

Mr. HAY. No land you could put into grass?

Mr. GREEN. No; not to last for a pasture. If we should raise cattle on that place it wouldn't last two months—a whole herd of cattle.

Mr. HAY. What is the character of this land? Is it good land or bad land?

Mr. GREEN. The soil is very shallow, sir. It is gravel bottom.

Mr. HAY. Some of it you can not cultivate at all, can you?

Mr. GREEN. No, sir; there is lots of land there that is waste land.

Mr. HAY. How much of it is waste land?

Mr. GREEN. I suppose there is a hundred acres on the two places, and over. There is land that can not be cultivated.

Mr. SMYSER. Could not that be adapted to sheep? Or is it so poor that you can't raise sheep on it?

Mr. GREEN. I don't think sheep would do much on that. It is all hillsides.

Mr. HAY. Sheep have to be shifted, do they not?

Mr. GREEN. Yes, sir; they have to be shifted from pasture to pasture.

Mr. HAY. You can't keep them in one place all the time. Could this 100 acres be utilized for anything else? How near is it to the city?

Mr. GREEN. This one is about a mile from the city. The lower farm is about 5 miles.

Mr. HAY. I am talking about this hundred acres of waste?

Mr. GREEN. I say from the two places. There is fully 50 acres of waste land on each place. We get about the same quantity of waste land on each place.

The CHAIRMAN. You say, though, you could raise hogs if proper buildings were constructed?

Mr. GREEN. Yes, sir.

The CHAIRMAN. Have you any idea what it would cost to erect buildings so that you could raise your six or eight hundred hogs you speak of?

Mr. GREEN. I don't know exactly now. Everything in the building line is pretty high, but it wouldn't require very expensive buildings for hogs. The place we have is not suitable for them at all. It is all a cellar underneath them, and the waste and everything runs under there and it makes the place unhealthy.

The CHAIRMAN. Where do you get your water on the farm?

Mr. GREEN. We get it from the river and springs. It is piped over. We have pure spring water and river water.

The CHAIRMAN. Is the water good out there?

Mr. GREEN. Yes, sir; the finest artesian water.

Mr. SMYSER. Why can you not raise hogs on that hundred acres? Is there a place to keep them?

Mr. GREEN. There is hillsides. We couldn't get to them to attend to them. You couldn't put any houses on the side of a hill like that, to stand. It is ravines, and places like that. Nothing but shrubbery.

Mr. SMYSER. The hogs would go up and down there, would they not?

Mr. GREEN. Yes, sir; you might arrange it some way, but you couldn't fix a nice place for hogs there.

Mr. SMYSER. Have you ever given that matter of hog raising any particular study?

Mr. GREEN. We have raised hogs ever since we have had the place, because we have had so much wheat every year; but under the law in the District, we couldn't turn those hogs out there and let them. We have to keep them in a place where we keep the pens washed and clean.

Mr. SMYSER. Under the law, would you not dare let them out on your farm, that is, beyond the District?

Mr. GREEN. You would have to go back out of the District.

Mr. SMYSER. This poor land is in the District, then, is it?

Mr. GREEN. Sir?

Mr. SMYSER. This 100 acres you speak of is in the District?

Mr. GREEN. No, sir. Fifty acres of it is in the District. The other is at Oxenhill, about 5 miles. There is land there that the tide comes in on and you can't do anything with it. We never could do anything with it. Of course when the tide is in it all overflowed, and when the tide goes out you can't do anything with it. You can't even graze it, because there is mire in there.

Mr. HAY. That is on the Eastern Branch, is it?

Mr. GREEN. No, sir; on the Oxen Run. That is where the line of Maryland comes into the District, right across from the old ferry at Alexandria.

Mr. SMYSER. What I mean, Mr. Green, is this: Did you, as the farmer up there, experiment in this way. Did you ever take a boar and, say, three or four or half a dozen brood sows and experiment for a period of eighteen months or two years and see whether that was profitable or not?

Mr. GREEN. That is the way we raised all the hogs we ever had. We would buy a boar or so and some sows, and raise the rest of them from them.

Mr. SMYSER. Did you keep any account of cost, so as to know whether it was profitable?

Mr. GREEN. Yes, sir; it was profitable. It is all right. It pays to raise hogs.

Mr. SMYSER. But you ceased by reason of the cholera?

Mr. GREEN. That is all, sir.

Mr. SMYSER. You do not raise any horses, of course?

Mr. GREEN. No, sir; no horses.

The CHAIRMAN. There is no money in that, is there?

Mr. GREEN. Not where you have to keep them up and feed them all the time.

The CHAIRMAN. You can not raise horses profitably without having good pasture?

Mr. GREEN. Not without having good pasture; no, sir. It is the same way with calves. There is no use to try to raise calves and keep them up and feed them all the time. You have got to have good pastures for them. If we were to turn our herd out on the farm there and graze, it wouldn't last two months for feed.

Mr. SMYSER. So the nature of the soil is such that cattle raising is out of the question?

Mr. GREEN. Yes, sir.

Mr. SMYSER. So far as the raising of any stock is concerned that would be at all profitable, it would be hogs?

Mr. GREEN. Yes, sir.

Mr. SMYSER. You have no roasting ears out there yet, have you?

Mr. GREEN. Not yet. We will have some soon.

TESTIMONY OF EVANDA FRENCH.

EVANDA FRENCH, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Mr. French, you are employed in St. Elizabeth's Asylum?

Mr. FRENCH. Yes, sir.

The CHAIRMAN. What is your position there?

Mr. FRENCH. House steward.

The CHAIRMAN. What is your salary?

Mr. FRENCH. Twelve hundred dollars a year.

The CHAIRMAN. You live in the hospital?

Mr. FRENCH. I board there. I go home at night.

The CHAIRMAN. What are your duties, Mr. French?

Mr. FRENCH. I receive and disburse all meats, vegetables, fruits, and so forth. I have general charge of the bakery and a large kitchen.

The CHAIRMAN. How long have you been in the hospital?

Mr. FRENCH. Fourteen years in my present position.

The CHAIRMAN. How long before that had you been in the institution?

Mr. FRENCH. I was 9 years with Doctor Godding and Doctor Richardson, and 3 years with Doctor Nichols.

The CHAIRMAN. So that you have been there altogether twenty-six years?

Mr. FRENCH. Yes, sir.

The CHAIRMAN. Fourteen years in your present position?

Mr. FRENCH. Yes, sir.

The CHAIRMAN. Will you state specifically what your duties are in regard to meat inspection?

Mr. FRENCH. I inspect all meats, both salt and fresh, everything that comes there, everything that is received.

The CHAIRMAN. Where does most of the meat come from?

Mr. FRENCH. Different contractors. Armour & Company are furnishing the fresh beef, Golden & Company the corned beef, Swift & Company furnish shoulders, J. A. Whitfield furnishes hams, sausages, etc.

The CHAIRMAN. Is J. A. Whitfield a local firm?

Mr. FRENCH. Yes, sir.

The CHAIRMAN. How does the meat come to you; does it come on the Baltimore and Ohio Railroad there, right to the place?

Mr. FRENCH. I don't know how it is shipped, but it is delivered to us by teams—wagons.

The CHAIRMAN. Do you use any canned meat of any kind?

Mr. FRENCH. No, sir; we use no canned meat except canned dried beef, chipped beef. That is the only canned beef or canned meat of any kind that has been used in the hospital for years.

The CHAIRMAN. How long have you been using canned dried beef?

Mr. FRENCH. We have been using it probably five or six years.

The CHAIRMAN. How does the corned beef come to you?

Mr. FRENCH. It is delivered by wagons. It is salted by Golden & Co. It is salted in Virginia, and killed in Virginia. They kill all their beef.

The CHAIRMAN. What part of Virginia?

Mr. FRENCH. Just across the river. It is about 3 miles, I think, from the city. I have never been there, but I know they have an abattoir there where they kill.

The CHAIRMAN. You inspect the corned beef as well as the other?

Mr. FRENCH. Yes, sir.

The CHAIRMAN. Have you ever had occasion to send back the corned beef?

Mr. FRENCH. Yes, sir; many, many times.

The CHAIRMAN. Why? What is the matter with it?

Mr. FRENCH. Because it is hurt.

The CHAIRMAN. It is what?

Mr. FRENCH. In bad condition.

The CHAIRMAN. Do you mean improperly salted, or that it is spoiled?

Mr. FRENCH. I mean in some cases it is too thin for use, and in other cases the meat is tainted. I have never received any corned beef for years that I don't take a knife and cut it clear in two and test it by smelling it before receiving it. I used to test it with a tester years ago, but I found sometimes that something would slip by me, so I adopted the plan of cutting every piece in two.

The CHAIRMAN. How large are these pieces of corned beef when they come to you?

Mr. FRENCH. They vary. Some weigh 10 pounds, some will weigh 20—30, probably.

The CHAIRMAN. How much corned beef do you get there?

Mr. FRENCH. We get about 3,000 pounds one week and about 1,600 to 1,800 the other week—alternate weeks.

The CHAIRMAN. It is delivered you in teams of Golden?

Mr. FRENCH. Yes, sir.

The CHAIRMAN. They bring it right to the storehouse?

Mr. FRENCH. Yes, sir. One week we use a full ration, 1,800 pounds. The other week we use only 400 pounds. We receive 1,100 pounds on one shipment and 1,800 pounds on one shipment—that is one week—and 1,100 pounds the next week, and probably about 500 or 600 pounds on the following, or the same week, so that it makes about 1,800 pounds one week and about 3,000 pounds in one week.

The CHAIRMAN. About 10,000 pounds a month?

Mr. FRENCH. About that; yes, sir.

The CHAIRMAN. When it gets to you, how do you preserve it? How do you care for it? Where do you put it?

Mr. FRENCH. We don't have to care for it. We use it immediately. We may keep it in cold storage over night; nothing more.

The CHAIRMAN. So that you never keep any considerable quantity on hand?

Mr. FRENCH. No, sir.

The CHAIRMAN. It is used as fast as it comes in?

Mr. FRENCH. Yes, sir. We don't keep corned beef. We do fresh beef:

The CHAIRMAN. How about fresh beef?

Mr. FRENCH. The fresh beef comes in the carcass.

The CHAIRMAN. Does that come; in sides?

Mr. FRENCH. In quarters. We have to take the whole bullock.

The CHAIRMAN. How do you preserve that after it comes to you?

Mr. FRENCH. We put it in cold storage. We have cold storage.

The CHAIRMAN. How much of that do you buy?

Mr. FRENCH. About 7,000 or 7,500 pounds a week.

The CHAIRMAN. Then you get the whole bullock and it is cut up under your supervision?

Mr. FRENCH. Yes, sir.

The CHAIRMAN. How do you test that?

Mr. FRENCH. By the appearance of the meat.

The CHAIRMAN. But you inspect every piece of meat that comes in just as you do every piece of salt meat?

Mr. FRENCH. Yes, sir.

The CHAIRMAN. Do you often have occasion to send any of that back?

Mr. FRENCH. Yes, sir; not as often as I do corned beef, but I have sent a good deal back very often.

The CHAIRMAN. Do you know any reason why you have to send the corned beef back oftener than fresh meat?

Mr. FRENCH. Because the contractor doesn't take care of it and have it in proper shape when he corns it.

The CHAIRMAN. Why do you send the fresh meat back? I mean, what is the matter with that when you have to send it back?

Mr. FRENCH. Sometimes it is bruised. Sometimes it is too thin, under weight. Sometimes it may be over weight, too fat and heavy.

Mr. SMYSE. Sometimes what?

Mr. FRENCH. Too fat and heavy.

The CHAIRMAN. So there is a maximum and a minimum weight, is there?

Mr. FRENCH. Yes, sir.

The CHAIRMAN. It is all weighed by you, and if it is either too heavy or too light you send it back?

Mr. FRENCH. Yes, sir.

The CHAIRMAN. Does that fresh meat ever come to you tainted?

Mr. FRENCH. I have had it, yes, sir.

The CHAIRMAN. Do you usually have to send back some of the meat from every shipment?

Mr. FRENCH. Not every shipment; no, sir.

The CHAIRMAN. How often is it necessary to send meat back to these contractors?

Mr. FRENCH. It is very rarely that corned beef comes out that there is not some pieces to send back. The pieces may be thin and bony, not up to the standard. That, of course, I throw out. Other pieces may be bruised. The cattle are shipped in cars, and you will find a piece of meat that is bruised. You can't perhaps always tell it until you cut a piece of meat open. If an animal is struck with a club before killing you will find a bruised place in the meat. All those things will happen with meat. Anything I find of that kind I always ship back.

The CHAIRMAN. Do you think this could be obviated in any way by dealing with somebody else?

Mr. FRENCH. No, sir; I don't know that it could. The contractor changes almost every year. We receive meat from almost every dealer in town.

The CHAIRMAN. The contracts are made by the Department of the Interior after advertisement?

Mr. FRENCH. Yes, sir.

The CHAIRMAN. Where is your beef killed from which you get the corned beef supply?

Mr. FRENCH. At the abattoir in Virginia.

Mr. HAY. Where is the fresh meat killed?

Mr. FRENCH. Our fresh meat comes from Chicago.

Mr. HAY. Is it killed there?

Mr. FRENCH. Yes, sir; it is killed there and sent here in refrigerator cars.

The CHAIRMAN. It comes to you already killed and you cut it up as you need it?

Mr. FRENCH. We cut it up; yes, sir.

Mr. SMYSER. How does it come to you with regard to cleanliness? How is it in that regard?

Mr. FRENCH. I have oftentimes had to discard condemned corned beef because it was not clean, but fresh beef comes in nice condition, so far as cleanliness is concerned.

The CHAIRMAN. Is it sewed up in sacks when it comes?

Mr. FRENCH. No, sir.

Mr. SMYSER. How is it preserved?

Mr. FRENCH. I can't tell you that.

Mr. SMYSER. By refrigeration alone?

Mr. FRENCH. By refrigeration alone, so far as I know.

Mr. SMYSER. Did you ever try to find out whether it was preserved by a chemical of any kind?

Mr. FRENCH. No, sir; I have not.

Mr. SMYSER. Why didn't you?

Mr. FRENCH. Because it was not my business. I don't know that I could if I tried.

The CHAIRMAN. Can you not tell whether beef has been preserved by chemicals?

Mr. FRENCH. I don't know that I could. I don't know that I could hold an analysis of it.

The CHAIRMAN. Is there any difficulty when you return this beef? Do the contractors complain of it at all when you send it back?

Mr. FRENCH. Not to me. They have always shipped in place of it.

The CHAIRMAN. And they pay the return freight?

Mr. FRENCH. Oh, yes. It is no cost to us. They deliver it by teams. The contract calls for immediate delivery at the hospital.

The CHAIRMAN. You buy this fresh meat by the whole bullock, you say?

Mr. FRENCH. By the whole bullock.

The CHAIRMAN. What is the usual weight of a bullock?

Mr. FRENCH. Our contract calls for meat to weigh not less than 600—I think that is it—nor more than 650. I believe that is the contract.

The CHAIRMAN. So that there can only be 50 pounds difference.

Mr. FRENCH. Fifty pounds.

The CHAIRMAN. Do you say not less than 600?

Mr. FRENCH. I don't know whether it was less than 600 or 650—or not more than 650.

Mr. SMYSER. Do you mean to say there is only a margin of 50 pounds?

Mr. FRENCH. I think the margin is 100 pounds.

The CHAIRMAN. If you do not know that, Mr. French, perhaps you had better not state it.

Mr. FRENCH. I don't know that I could state it specifically.

Mr. HAY. I suppose the contract will show?

Mr. FRENCH. It is in the contract list, but I don't know that I remember it so that I can state it specifically.

Mr. HAY. You get the whole bullock. How much of that whole bullock is there that you can not use?

Mr. FRENCH. Last month I handled 41,000 pounds of beef, carrying over something over 5,000 pounds into the next month, making about between 35,000 and 36,000 pounds of beef that I handled, and there was 2,000 and some odd pounds of weight that went out for soap grease, tallow, etc.

The CHAIRMAN. What is done with that waste?

Mr. FRENCH. It is sold to a soap factory.

Mr. HAY. Who keeps that account?

Mr. FRENCH. I keep it.

The CHAIRMAN. Who do you sell that to?

Mr. FRENCH. Hopfenmyer.

The CHAIRMAN. Here in town?

Mr. FRENCH. Yes, sir.

The CHAIRMAN. Is there any other waste that can be sold for money other than this 2,000 pounds?

Mr. FRENCH. Oh, yes. All the waste, soap grease, tallow from the beef, etc., goes in a lump. That is sold to Hopfenmyer. He comes now three times a week to collect it.

The CHAIRMAN. What does he pay for this waste?

Mr. FRENCH. One cent a pound. He takes the bones and soap grease and everything of that kind.

Mr. SMYSER. When your beef comes, it is shipped in quarters?

Mr. FRENCH. Shipped in quarters.

Mr. SMYSER. So when you speak of the whole bullock, you mean the whole bullock cut up into four quarters?

Mr. FRENCH. Cut up into four quarters.

Mr. SMYSER. That is all you get?

Mr. FRENCH. I receive usually so many cattle, so many fore quarters and so many hind quarters.

The CHAIRMAN. What else do you receive?

Mr. FRENCH. Fruit, vegetables, and berries.

The CHAIRMAN. Do you receive the canned vegetables, too?

Mr. FRENCH. No, sir.

The CHAIRMAN. Those do not come to you?

Mr. FRENCH. No, sir; those don't come to me; those come to the storeroom proper.

The CHAIRMAN. Who takes charge of those?

Mr. FRENCH. Mr. Harnish or Mr. Sanger. Mr. Sanger is in charge of the storeroom.

The CHAIRMAN. So the only things besides meat that you receive are the fresh vegetables?

Mr. FRENCH. Potatoes.

The CHAIRMAN. Potatoes and fruits?

Mr. FRENCH. Potatoes and fruits.

The CHAIRMAN. Everything, in other words, except the canned vegetables?

Mr. FRENCH. Except what would properly go to the grocery storeroom.

Mr. HAY. Nobody else inspects this fresh beef but you, Mr. French?

Mr. FRENCH. When I find beef that is bad, I always report it to Mr. Offutt, the purchasing agent, and in his absence I report to Doctor White, the superintendent. Whenever I condemn anything, I always report to them.

Mr. HAY. But are you or Mr. Offutt or Doctor White expert meat inspectors?

Mr. FRENCH. I don't know that I could say that I am.

Mr. HAY. You said you could not tell whether meat was preserved only by refrigerating process or whether something else had been used to preserve it?

Mr. FRENCH. No, sir; I don't think I could.

Mr. HAY. Can the purchasing agent tell?

Mr. FRENCH. I couldn't tell you that. I don't know.

Mr. HAY. Do you know whether he has had any experience about that matter?

Mr. FRENCH. No, sir; I do not.

Mr. HAY. Is it not a fact, that a man, to be an expert meat inspector, has to have some education along that line?

Mr. FRENCH. I think so.

The CHAIRMAN. But you have been inspecting meat for fourteen years?

Mr. FRENCH. Yes, sir; I have been doing it more than that. I did it under the Taunton Hospital in Massachusetts, and under this hospital three years for Doctor Nichols. I commenced my services in that line with Doctor Nichols.

The CHAIRMAN. Do you receive the vegetables and the fruits you receive in the same way?

Mr. FRENCH. Yes, sir.

The CHAIRMAN. Do you often have to send those back?

Mr. FRENCH. No, sir.

The CHAIRMAN. Where do you get your potatoes.

Mr. FRENCH. Mr. Offutt buys of different dealers. Our last potatoes are coming from G. Taylor Wade.

The CHAIRMAN. You keep track of everything that comes into the storeroom and goes out of the storeroom, do you?

Mr. FRENCH. Everything that comes in in that line; yes, sir.

The CHAIRMAN. I mean in that line.

Mr. FRENCH. Yes, sir.

The CHAIRMAN. How many potatoes do you buy a year or a month?

Mr. FRENCH. We use about 800 bushels a month.

Mr. HAY. Are those bought in open market, or are they contracted for?

Mr. FRENCH. They are bought in the open market.

Mr. HAY. How many other kinds of vegetables? What vegetables do you use more than any others? Potatoes, and what else?

Mr. FRENCH. We use cabbage, kale, and all kinds of vegetables.

Mr. HAY. Do you raise cabbage and kale on the farm sufficient for the use of the institution?

Mr. FRENCH. No, sir.

Mr. HAY. How many heads of cabbages do you buy every month?

Mr. FRENCH. I could hardly tell you how many we buy a month. It depends on how many we have on the place. It takes about twenty barrels of cabbage for one meal.

Mr. HAY. How many heads of cabbage in a barrel?

Mr. FRENCH. It depends on the size of the cabbage. They run all the way from 20 to 40. I have had them run 40, and I have had them run 20 and 30.

Mr. HAY. What is the average?

Mr. FRENCH. It would average about 30 heads to the barrel.

Mr. HAY. And you used 20 barrels a day?

Mr. FRENCH. 20 barrels to a meal.

Mr. HAY. To a meal?

Mr. FRENCH. To one meal.

Mr. HAY. How many cabbage would that be a day?

Mr. FRENCH. Reckoning 30 heads to the barrel, it would be about 600 heads to a meal. Of course we don't use cabbage every day.

Mr. HAY. You buy those in the open market?

Mr. FRENCH. In the open market.

Mr. HAY. From whom do you generally buy them?

Mr. FRENCH. Sometimes one and sometimes another. Strang often furnished them, and Taylor Wade, and E. J. Adams.

Mr. HAY. They are all people in the District, are they?

Mr. FRENCH. Yes, sir.

The CHAIRMAN. Those are purchased by Mr. Offutt?

Mr. FRENCH. Yes, sir.

The CHAIRMAN. You have nothing to do with purchasing the goods yourself?

Mr. FRENCH. No, sir.

The CHAIRMAN. You merely receive them after they are purchased?

Mr. FRENCH. I merely receive them.

The CHAIRMAN. And you merely distribute them to the different parts of the institution, to be cooked, etc.?

Mr. French. Yes, sir.

Mr. HAY. What other vegetables?

Mr. FRENCH. It depends upon what we have on the farm—kale, cabbage, and sometimes turnips.

The CHAIRMAN. Carrots?

Mr. FRENCH. No; we don't buy carrots. We don't use carrots except for seasoning soup, and those are raised on the farm.

Mr. HAY. Oyster plant?

Mr. FRENCH. We raise that.

Mr. HAY. Do you raise enough oyster plant to give all the patients oyster plant during the season?

Mr. FRENCH. Yes, in the time we are using it, we do.

Mr. HAY. How long do you use it?

Mr. FRENCH. Two or three months in the winter.

Mr. HAY. How much canned fruit do you get?

Mr. FRENCH. I don't receive canned fruit.

Mr. HAY. How much fresh fruit do you get?

Mr. FRENCH. I distributed this morning before I came away about 270 quarts of cherries, 414 quarts of strawberries, and 192 quarts of blackberries. We usually use anywhere from 5,000 to 6,000 quarts of strawberries during the strawberry season, and as many blackberries during the blackberry season. A year ago last winter, and two years ago this last winter, we averaged more than 100 barrels of apples a month. Last winter they were so high that we did not use them. We couldn't use them.

Mr. HAY. Did you use anything in place of them?

Mr. FRENCH. Evaporated fruits.

Mr. HAY. Do you buy any oranges?

Mr. French. No, sir; I haven't bought any oranges for some little time.

Mr. HAY. How long since?

Mr. FRENCH. Two years. Well, we bought a few at Christmas, but not to speak of.

Mr. HAY. I mean as a general thing. Two years, you say?

Mr. FRENCH. Yes, sir.

Mr. HAY. Then apples are the only kind of fruit you use, and you did not use them last winter because they were so high?

Mr. FRENCH. They were so high we couldn't buy them.

Mr. HAY. Now about the grapes. How many grapes do you raise on the farm?

Mr. FRENCH. I think about eight tons last year. They usually vary from six to ten tons a year.

Mr. HAY. Any peaches?

Mr. FRENCH. Very few last year. A year ago we had a great many; several hundred bushels.

The CHAIRMAN. Did you raise those?

Mr. FRENCH. Yes, sir; I think 500 or 600 bushels a year ago, but very few last year.

Mr. HAY. Yes, they come in alternate years generally, do they not?

Mr. FRENCH. Yes, sir.

Mr. HAY. Mr. French, in the distribution of these fresh fruits through the different wards, are the berries and the apples and the grapes, etc., all distributed through the wards equally?

Mr. FRENCH. Yes, sir.

Mr. HAY. Do all classes of inmates in the hospital get this fruit?

Mr. FRENCH. All classes, everyone alike.

Mr. HAY. There is no discrimination made between the different wards?

Mr. FRENCH. No discrimination. If we haven't enough to serve the whole house, we serve one part of it to-day and the other to-morrow, but everybody equally.

Mr. HAY. Mr. French, in distributing all the supplies you get there for the hospital, do you make any discrimination in the character of the supplies distributed to the different parts of the hospital?

Mr. FRENCH. No, sir; with the exception of the diet for the sick people. The sick people are always thought of first.

Mr. HAY. I suppose you have a special diet for the sick?

Mr. FRENCH. A special diet for sick people.

Mr. HAY. In the distribution to the employees of the hospital, do they get the same as the patients?

Mr. FRENCH. No, sir. In cooking, etc., their cooking is done separately.

Mr. HAY. But do they get the same things to cook as the other people?

Mr. FRENCH. Yes, sir.

Mr. HAY. And is it the same way with the superintendent and all the staff?

Mr. FRENCH. Yes, sir.

Mr. HAY. The same is distributed to them as to the rest?

Mr. FRENCH. Of course, in the distribution of meat, etc., there is always a good cut of meat sent to the officers' tables.

Mr. HAY. But as a general thing are any purchases made specially for any particular class outside of the sick people?

Mr. FRENCH. No, sir; there is not. There has been a standing order from the superintendent that nothing should be purchased for any table that was not divided to the patients; given to the patients. That has been a standing order ever since Doctor White has been there.

Mr. SMYSER. Do you use any bacon out there?

Mr. FRENCH. Yes, sir; we use about 4,000 pounds a month.

Mr. SMYSER. Where do you get that?

Mr. FRENCH. J. A. Whitfield furnishes it. It is smoked here in town. That is a local firm.

The CHAIRMAN. He is the same man who furnished the hams?

Mr. FRENCH. Yes, sir.

Mr. SMYSER. Do you use any mutton?

Mr. FRENCH. We do sometimes in the winter. We are not using any now. We do use some mutton in the winter. Swift is the contractor for mutton.

Mr. SMYSER. Do you use any wienerwursts?

Mr. FRENCH. No, sir.

The CHAIRMAN. Do you use any spinach?

Mr. FRENCH. Yes, sir.

The CHAIRMAN. Is that raised on the farm?

Mr. FRENCH. It is raised on the farm.

The CHAIRMAN. Any sauerkraut?

Mr. FRENCH. Yes, sir.

The CHAIRMAN. Where does that come from?

Mr. FRENCH. We usually buy it. We have made it, but not often.

Mr. SMYSER. Do you use beets?

Mr. FRENCH. Yes; a great many beets.

Mr. SMYSER. Where do you get them?

Mr. FRENCH. We raise them.

Mr. SMYSER. Any lettuce?

Mr. FRENCH. Yes, sir.

Mr. SMYSER. Where do you get that?

Mr. FRENCH. We raise it.

Mr. SMYSER. Any muskmelons?

Mr. FRENCH. Yes, sir.

Mr. SMYSER. Or watermelons?

Mr. FRENCH. Yes, sir; thousands of them.

Mr. SMYSER. Where do you get them?

Mr. FRENCH. We raise them.

Mr. SMYSER. Any radishes?

Mr. FRENCH. Yes, sir; hundreds of bunches—thousands.

Mr. SMYSER. Where do you get them?

Mr. FRENCH. We raise them.

The CHAIRMAN. Pumpkins?

Mr. FRENCH. We use pumpkins for pies; yes, sir.

Mr. SMYSER. Is it a good, old-fashioned pumpkin pie you make out there?

Mr. FRENCH. Fine. We will give you a fine piece if you come out.

Mr. SMYSER. I will be out.

The CHAIRMAN. How about squash? Do they raise those?

Mr. FRENCH. Yes, sir; a great many tons, we had last year.

Mr. HAY. Are there any wards there that have their own individual kitchens?

Mr. FRENCH. No single wards. We have 12 different kitchens there. There are buildings that have their separate kitchens.

Mr. HAY. How about Maple ward, and Poplar ward? I think Doctor White testified they got a little better service.

Mr. FRENCH. Yes, sir; their cooking is in the same general kitchen.

Mr. HAY. Their cooking is in the general kitchen?

Mr. FRENCH. In the general kitchen.

Mr. SMYSER. Do you use any cucumbers or peas?

Mr. FRENCH. Yes, sir; we use a great many of both.

Mr. SMYSER. Do you raise them?

Mr. FRENCH. Yes, sir.

The CHAIRMAN. Tomatoes?

Mr. FRENCH. Yes, tomatoes; hundreds of bushels.

The CHAIRMAN. Those are raised, are they?

Mr. FRENCH. Yes, sir.

Mr. HAY. Mr. French, do you consider the truck raised on the farm essential to the use of the hospital?

Mr. FRENCH. I do, very. We are sometimes put to our wits end. Where you have got 3,000 people to get up dinner for you have got to have something to get it with. I distribute all that stuff on orders. For instance, the berries. Before I came away this morning I had orders made out. The distributing of them was done by the housekeeper, the chef. She gave me the number of quarts of berries that would be sent to each ward, so many to a box.

Mr. HAY. You do not raise those berries on the farm, do you?

Mr. FRENCH. Those are raised on the farm. We buy some. We don't arise enough, but those I distributed this morning were raised on the farm.

Mr. HAY. Mr. French, during the season, I mean when vegetables are growing and coming in, does the farm generally supply vegetables enough to give the patients a pretty good vegetable diet?

Mr. FRENCH. During the vegetable season, yes, sir. Last winter, during the early part of the winter, we had turnips, a large supply of turnips; as many as we could use for some time. When those were gone we had to buy kale for a while, as soon as the kale came into market, until our own kale was grown. Then we had hundreds of barrels of our own. Some months we use as high as 200 to 250 barrels of kale.

The CHAIRMAN. There are many more vegetables raised on the farm than you buy?

Mr. FRENCH. Oh, yes, sir; three times as many.

Mr. HAY. If you did not have the farm you could not supply vegetables enough there, could you?

Mr. FRENCH. I don't think the market would hardly supply us if we did not. Oftentimes vegetables are scarce on the market and you can't get them in the quantity we need.

The CHAIRMAN. Do you raise string beans?

Mr. FRENCH. Yes, sir; hundreds of barrels of them.

Mr. WALLACE. Watermelons?

Mr. FRENCH. Yes, sir; lots of them. We will give you a fine one if you come out by and by.

Mr. HAY. What time do you get them?

Mr. FRENCH. About August.

TESTIMONY OF W. C. FOLSOM.

W. C. FOLSOM, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. Mr. Folsom, you are employed in St. Elizabeth's, are you not?

Mr. FOLSOM. Yes, sir.

The CHAIRMAN. How long have you been there?

Mr. FOLSOM. Since the 27th of January, 1904.

The CHAIRMAN. What are your duties there?

Mr. FOLSOM. I have charge of the lighting plant about a 1,500 horsepower plant, the pumping station, the ice plant, all the steam heating and plumbing, the locomotive, and generally all the mechanical work around the grounds.

The CHAIRMAN. You are the chief engineer of the establishment?

Mr. FOLSOM. Yes, sir.

The CHAIRMAN. Have you been chief engineer ever since you were appointed over there?

Mr. FOLSOM. Yes, sir.

The CHAIRMAN. Where did you come from?

Mr. FOLSOM. I came from Iowa, originally. I have been in Washington about eight years.

The CHAIRMAN. And you have been in the engineering business. That is your regular trade?

Mr. FOLSOM. Yes, sir; I have been in the engineering business ever since I was 13 years old.

The CHAIRMAN. Did you have to take any civil service examination when you came over to St. Elizabeth's?

Mr. FOLSOM. No, sir; I made out the application on the regular form and put it in.

The CHAIRMAN. But you did not have any mental examination when you came to the hospital?

Mr. FOLSOM. No, sir.

The CHAIRMAN. What is your salary?

Mr. FOLSOM. \$1,800 a year and my board.

The CHAIRMAN. Do they make all the ice that is used in the hospital in your ice machines?

Mr. FOLSOM. Yes, sir.

The CHAIRMAN. How many tons do you make?

Mr. FOLSOM. In the winter time we only run about two tons of ice. In the summer time we will use six or seven tons of ice a day.

The CHAIRMAN. And your plant is sufficient to make all that is necessary?

Mr. FOLSOM. We have a capacity of ten tons of ice, and we probably have about six tons cold storage capacity, but we have a machine capacity for forty tons, cold storage.

The CHAIRMAN. And you run the cold storage plant in connection with the ice plant, of course?

Mr. FOLSOM. Yes, sir; that is piped right off my brine tanks.

The CHAIRMAN. You also have charge of the heating plant and the lighting plant, have you?

Mr. FOLSOM. Yes, sir.

The CHAIRMAN. The heating plant and the lighting for the entire institution?

Mr. FOLSOM. For the entire institution.

The CHAIRMAN. Is the institution generally lighted by electricity?

Mr. FOLSOM. All through.

The CHAIRMAN. What kind of a heating plant have you? Is it direct steam radiation?

Mr. FOLSOM. No, sir; there is very little direct radiation, only on the halls, and a few of the rooms. Most of it is indirect. In the old buildings the radiators for each room are placed in the basement, with a flue going up to the room. In the new buildings the heating coils are all placed in a sheet-iron room in basement, and the hot air is driven up by a Sturdevant fan.

The CHAIRMAN. How recently has the first heating plant been put in; do you know?

Mr. FOLSOM. The new heating plant was in operation when I went there, but the buildings had not been turned over yet by the contractors—all of them. It has been in service now about two years.

The CHAIRMAN. Who put it in; do you know?

Mr. FOLSOM. I don't know who the contractors were.

The CHAIRMAN. Do you superintend the railroad that is there on the place?

Mr. FOLSOM. I have charge of the locomotive engine. I have not charge of the track.

The CHAIRMAN. How many locomotives have you?

Mr. FOLSOM. I have one.

The CHAIRMAN. How much track have you?

Mr. FOLSOM. I think altogether there is about a mile.

The CHAIRMAN. When you say you look after the locomotive, of course there is an engineer and fireman connected with the locomotive under you?

Mr. FOLSOM. They come under me; yes, sir.

The CHAIRMAN. But if anything gets the matter with the locomotive, you attend to it?

Mr. FOLSOM. All repairs.

The CHAIRMAN. Have you a good locomotive there?

Mr. FOLSOM. Yes; it is a very good locomotive, a 33-ton Baldwin. It was put in service two years ago last month.

The CHAIRMAN. Somebody, I think it was Doctor White, testified there had been from time to time considerable trouble with the track.

Mr. FOLSOM. Yes, sir; there is a great deal of trouble with the track.

The CHAIRMAN. What is the reason of that?

Mr. FOLSOM. It is built up along the hillside through the ravine, and the nature of the soil is such that it slides away from it and lets the track down. It is continually raising the track and jacking it up, and there is a good deal of trouble in that way, especially after heavy rains. I have known it to go away there in a night so that 6 or 8 feet of track would not have any bank under it at all, the rails simply swinging.

The CHAIRMAN. How could that be remedied?

Mr. FOLSOM. That is a difficult question. They have had some pretty thorough civil engineers working on it and they failed entirely to solve the problem yet.

The CHAIRMAN. Could the track be laid any place else?

Mr. FOLSOM. No, sir; not conveniently, on account of the grade. We have as heavy a grade there as there is almost any place in the Allegheny Mountains. We have a grade of $4\frac{1}{2}$ per cent.

The CHAIRMAN. What else have you charge of?

Mr. FOLSOM. The pumping station.

The CHAIRMAN. What kind of a pumping station have you there?

Mr. FOLSOM. We have a very good pumping station there. We have two Deoria pumping engines.

The CHAIRMAN. What is their capacity?

Mr. FOLSOM. About 1,300,000 gallons a day, apiece. We never have used but one of them. We have a relief engine. We have four Ingersoll-Sargent air compressors to pump the water from the deep wells. Two of them have a capacity of, I think, 360 cubic feet of free air a minute; one of them has a capacity of 480, and one has a capacity of 960.

The CHAIRMAN. Is your water supply good there?

Mr. FOLSOM. It is about as good as could be had; yes, sir. They are all artesian wells. They run from 212 to 386 feet deep.

The CHAIRMAN. How many of them are there?

Mr. FOLSOM. We have 8 of them.

The CHAIRMAN. That gives all the water you need for the entire institution?

Mr. FOLSOM. Yes, sir. We are only pumping 7 of them at a time now. Of course, in real hot weather in the summer when they are

using a good bit of water on the lawns we then have to run all of the wells.

The CHAIRMAN. How are the supplies for all of these matters you have to attend to obtained when you need new supplies, or new pipes, or anything?

Mr. FOLSOM. They are bought on the open market, but all we possibly can we put on yearly contract, such as the coal and the oil. This year a great many of the plumbing supplies, the piping and the fittings, the valves, compression cocks, self-closing basin cocks, and such things as that, we put on contract.

The CHAIRMAN. You put everything under contract you possibly can, I suppose?

Mr. FOLSOM. Yes, sir.

Mr. SMYSER. Where do you get your coal?

Mr. FOLSOM. The Maryland Coal and Coke Company are supplying us this year.

Mr. SMYSER. What do you pay for it?

Mr. FOLSOM. I think it is \$2.75 a ton.

Mr. SMYSER. Is that delivered?

Mr. FOLSOM. Yes, sir; delivered on our track.

Mr. SMYSER. Where do you get your oil?

Mr. FOLSOM. It comes from the Standard Oil Company, but it comes through local dealers. I think Becker, of Georgetown, has the engine oil, and Muth has the cylinder oil.

Mr. SMYSER. Is that bought by competitive bids?

Mr. FOLSOM. Yes, sir; we write a specification for the oil to be to a certain standard, and they send us samples of about a pint. Those are sent over to the Department of Agriculture and analyzed. They send back then the analysis, and we select a number of samples that come the nearest to the specifications. Then 10-gallon samples are ordered of each one of these, and I run a test on the engine to see how they stand in actual work, and from those samples the oil is selected.

Mr. SMYSER. There is first an analysis by the Agricultural Department?

Mr. FOLSOM. Yes, sir; then a test run on our engines. I will say that when these samples come to us we don't know whose oil it is. They come labeled with a letter or a number. The key is kept at the Interior Department, and after the oil is selected the key is opened, and not until then does anybody know who the bidder is that has that sample of oil.

The CHAIRMAN. And you pass upon the quality of the oil?

Mr. FOLSOM. Yes, sir; I pass on the quality of the oil, in conjunction with the analysis from the Agricultural Department.

The CHAIRMAN. Do you have charge of the weighing of the coal at the institution?

Mr. FOLSOM. No, sir; Mr. Green weighs the coal.

The CHAIRMAN. What else is there, Mr. Folsom? Was there not something else you mentioned that you had charge of also?

Mr. FOLSOM. The ice plant.

The CHAIRMAN. We have had that.

Mr. FOLSOM. In fact, all the mechanical engineering work on the grounds.

The CHAIRMAN. The plumbing you spoke of.

Mr. FOLSOM. Yes, sir; the plumbing.

The CHAIRMAN. Do you have charge of all the plumbing in the entire institution?

Mr. FOLSOM. Yes, sir.

The CHAIRMAN. Do you keep a staff of journeymen plumbers and assistants on hand?

Mr. FOLSOM. Yes, sir.

The CHAIRMAN. So that all the work in connection with all of this machinery is done under your supervision by the regular employees of the asylum?

Mr. FOLSOM. Yes, sir. Occasionally we have some contract work—some large work that we can't handle with our men. Then it is put out to contract.

The CHAIRMAN. But for the regular, every day routine work, it is all done by the regular employees at the hospital?

Mr. FOLSOM. Yes, sir; We never have had anybody in there since I have been there to do any of the routine from outside.

Mr. WALLACE. Mr. Folsom, was there anything the matter with your machinery when Brown was scalded?

Mr. FOLSOM. That came from what is known as a "Clow heater." It is one of the standard heaters on the market. The thermostat became choked up with a little sediment. The thermostat failed to operate. The steam got backed up in the cold-water line and backed up into the toilet.

Mr. WALLACE. You did not state, did you, that one of your assistants put hot water instead of cold water in the pipe?

Mr. FOLSOM. He could hardly do that. This heater is piped right from our general cold-water supply. There is a main comes in from the street main and branches. The cold water goes to the cold-water side of the lavatories and the closets, and the other branch goes to the heater, and the hot water for the lavatories is taken off from that. When this heater became overheated, the pressure in the heater was greater than the pressure on the main and backed the water from the heater out into the cold-water pipes.

The CHAIRMAN. Is that the only time since you have been there that an accident of that kind happened?

Mr. FOLSOM. Once since then the heaters backed up, but it was caught in time, and nobody was hurt in there.

Mr. HAY. You say you are from Iowa, Mr. Folsom?

Mr. FOLSOM. Yes, sir.

Mr. HAY. You have been in the District eight years?

Mr. FOLSOM. Yes, sir.

Mr. HAY. You were first employed at the hospital in 1904?

Mr. FOLSOM. Yes, sir.

Mr. HAY. Where were you employed before that time?

Mr. FOLSOM. I first went to work for what was then the Potomac Electric Light and Power Company, in Georgetown. It afterwards has been formed into the syndicate, the Washington Electric and Traction Company. I was with them for three years. Then I was at the Shoreham Hotel. I did a good bit of erecting work. I helped put up a large ice plant for Chapin & Sacks, and was with Loeffler in the abattoir.

Mr. HAY. Are you getting a better salary at St. Elizabeth's than you got at either of these other places?

Mr. FOLSOM. I get some better salary than I did at the other places; but the responsibility is a great deal heavier than I had at the other places.

Mr. HAY. You get \$1,800 a year and your board?

Mr. FOLSOM. Yes, sir.

Mr. HAY. Have you a family?

Mr. FOLSOM. I have a family, but I live at home. I don't stay at the hospital. I just take my meals there.

Mr. HAY. Are you a practical plumber yourself?

Mr. FOLSOM. Well, no, sir; I am not a plumber, but I have been around enough to see the work and know when a job is well done.

Mr. HAY. How many plumbers have you employed under you?

Mr. FOLSOM. I have one chief plumber and one assistant, and then two plumber's helpers.

Mr. HAY. What do you pay those men?

Mr. FOLSOM. The chief plumber gets \$70.

Mr. HAY. Seventy dollars a month?

Mr. FOLSOM. Yes, \$70 a month; and the assistant plumber is now getting \$40 a month. The two plumber's helpers get \$35 a month; and of course their board is always included with the salary.

The CHAIRMAN. Are they union men?

Mr. FOLSOM. No, sir; not to my knowledge.

The CHAIRMAN. How many people do you employ on the railroad?

Mr. FOLSOM. I only have the locomotive engineer and his fireman.

The CHAIRMAN. What are they paid?

Mr. FOLSOM. The engineer gets \$50 a month and the fireman \$25, and their board.

The CHAIRMAN. How many men have you under your control?

Mr. FOLSOM. At present I have 42. In the winter time it will run up to about 48 or 50.

The CHAIRMAN. What are they paid; do you know?

Mr. FOLSOM. Two assistant engineers at the power house get \$70 a month.

The CHAIRMAN. And board?

Mr. FOLSOM. And board. The two oilers get \$50 a month and board. Two water tenders at the power house get \$45 a month. There are now six firemen in the power house, and they get \$40 a month. In the pumping station the two engineers get \$50 a month and the firemen get \$40. There are two engineers and two firemen in the pumping station. In the ice plant, the two men in charge of the ice plant get \$50 a month. Then I have one assistant engineer who works as a relief man back and forth between the places. He gets \$50. Then besides the plumbers, I have the steam fitters. One steam fitter gets \$55 a month; one gets, I think, \$52 a month, and the steam fitter's helper gets \$45. Another one gets \$40. Then I have a machinist at \$2.50. He is a per diem man. I have a machinist's helper at \$40 a month. I have a storekeeper at \$45 a month.

The CHAIRMAN. When anybody resigns or you discharge anybody, do you employ people to take their places?

Mr. FOLSOM. No; I go to the civil service clerk there and call for a man.

Mr. HAY. What sort of examinations do these people have to pass? Do they just fill out an application?

Mr. FOLSOM. Yes, sir.

Mr. HAY. A man in charge of a plant there does not have to pass any other examination except to fill out one of these blanks that we saw?

Mr. FOLSOM. Yes; that is, as I understand it. .

The CHAIRMAN. How large an ice plant have you?

Mr. FOLSOM. We have two Remington machines, 10 tons cold storage capacity, and one York machine of 20 tons. The York machine was put in last summer.

Mr. SMYSER. Mr. Folsom, we have a little oil concern out in my neck of the woods. Can they, under the manner of purchase of your oil, come into the market, and if their oil is up to the standard and the price is right, secure that contract?

Mr. FOLSOM. Yes, sir; they could.

Mr. SMYSER. Notwithstanding the fact that the Standard Oil Company is a competitor?

Mr. FOLSOM. Yes, sir; I think they could, because as I say, we do not know who is buying until the key is opened. The contract is entirely awarded on the samples and according to the price. If we have three or four samples of oil that all run good, up to the standard, then it lays with the price as to who gets the contract.

Mr. WALLACE. Does your machinery frequently get out of order?

Mr. FOLSOM. No, sir, not frequently.

Mr. WALLACE. Do you have furnaces burned out occasionally?

Mr. FOLSOM. Occasionally we may have some tubes burn out on the boiler, but when you have eighteen boilers to take care of, that is something that is liable to occur at any time at any place.

Mr. WALLACE. Did you personally act as engineer on the road there at any time?

Mr. FOLSOM. I have at times; yes, sir.

Mr. WALLACE. Did you have any accident?

Mr. FOLSOM. One time we had a car off the track. I guess in the last two years we have had some twelve or fourteen cars off the track, altogether.

Mr. CHAIRMAN. How much rolling stock have you there, by the way?

Mr. FOLSOM. We have nothing but the engine and two small dump cars.

The CHAIRMAN. The others are the cars that bring you the coal?

Mr. FOLSOM. Yes, sir; they belong to the B. and O. road.

Mr. WALLACE. You explained while ago that the best engineers had investigated that roadbed and had not yet succeeded in preventing the sliding of the track, etc.

Mr. FOLSOM. Yes, sir; we had some civil engineers over there considered well up in the business, and they have not been able to hold it as yet. The nature of the soil is such that you do not know when it is going away. If we have a long dry spell it will hold all right, but when it comes a wet, rainy spell in the course of three or four days the first thing you know the bank is all gone. It slides right away. The B. and O. Railroad have had just the same trouble outside of our wall on a section of track running down toward Shepherds Landing.

LETTER FROM WASHINGTON LOAN AND TRUST COMPANY.

The CHAIRMAN. Gentlemen, there is Mr. Andrew Parker, of the Washington Loan and Trust Company here. He has just come in.

Mr. PARKER. I simply want to hand you a communication that I was directed to bring in regard to some funds that were referred to in the testimony here.

The CHAIRMAN. We will put this letter right in the record, if you desire us to do so.

Mr. PARKER. Yes, sir.

Mr. CHAIRMAN. I will read it.

The letter was read by the chairman, as follows:

THE WASHINGTON LOAN AND TRUST COMPANY,
Washington, D. C., June 4, 1906.

HON. JOHN VAN V. OLCOTT,
House of Representatives.

DEAR SIR: We notice in the Washington Post of the 31st ultimo, in a report of the testimony of Doctor White, Superintendent of the Government Hospital for the Insane, taken before your committee, a statement that the Washington Loan and Trust Company holds funds on behalf of pensioners who are in the care of the asylum and refuses to disburse such funds.

This company does hold several thousand dollars of such funds by appointment as committee in the case of certain insane persons who are pensioners and in charge of the superintendent of the asylum. It does not, however, refuse to pay out such moneys, but, on the contrary, has in a very large number of cases, and, in fact, invariably on proper order, disbursed and continues to disburse such funds. In two instances it has refused to pay to the superintendent of the asylum certain larger sums, about the payment of which there was legal doubt, except upon order of the court first obtained. The payment of these sums has been withheld for the reason that an order of the court has not been obtained by the superintendent of the asylum.

Yours, very respectfully,

ANDREW PARKER,
Treasurer.

TESTIMONY OF C. A. J. WILLIAMSON.

C. A. J. WILLIAMSON, after being duly sworn, was examined, and testified as follows:

The CHAIRMAN. What is your full name, Mr. Williamson?

Mr. WILLIAMSON. C. A. J. Williamson.

The CHAIRMAN. You are employed in St. Elizabeth's?

Mr. WILLIAMSON. Yes, sir.

The CHAIRMAN. What are your duties there?

Mr. WILLIAMSON. My duties are to look after the carpenters. I am foreman of the carpenters.

The CHAIRMAN. How long had you occupied that position?

Mr. WILLIAMSON. About 30 years.

The CHAIRMAN. In fact, ever since you went to the hospital?

Mr. WILLIAMSON. No, sir.

The CHAIRMAN. How long have you been connected with the hospital?

Mr. WILLIAMSON. Something over forty years.

The CHAIRMAN. You have been foreman about thirty years?

Mr. WILLIAMSON. About thirty years.

The CHAIRMAN. What is your present salary?

Mr. WILLIAMSON. \$1,200 a year.

The CHAIRMAN. And your board, I suppose?

Mr. WILLIAMSON. I partially board there. I eat there two meals a day, and I am absent on Sundays. I stay home.

The CHAIRMAN. What are your duties?

Mr. WILLIAMSON. General repairs, as a general thing, of buildings. I direct the carpenters; or building, when we have any to do and it is done by the institution.

The CHAIRMAN. How many men are there under you?

Mr. WILLIAMSON. There are four carpenters, three cabinetmakers, one mill man, and two helpers at present.

The CHAIRMAN. What do these people get paid?

Mr. WILLIAMSON. The carpenters and cabinetmakers \$3.50 a day. The helpers, \$1.40 a day.

The CHAIRMAN. Are they employed all the year around, this same set, or when there is nothing to do?

Mr. WILLIAMSON. Pretty much so. They have been this last year at any rate.

The CHAIRMAN. And you attend not only to the necessary repairs in the carpentering work of the buildings themselves, but also, with your cabinetmakers, fix furniture that is broken?

Mr. WILLIAMSON. They do the general repairs of the furniture, and if we are in a tight place they help in the carpenter line. A good cabinetmaker makes a very good carpenter.

The CHAIRMAN. It does not go the other way always.

Mr. WILLIAMSON. So we use them in when we are pushed right heavy for the other work.

The CHAIRMAN. Do you make the coffins, too, that are used in the hospital?

Mr. WILLIAMSON. Yes, sir.

The CHAIRMAN. You superintended the repairs to the floor in one of the new buildings, did you not?

Mr. WILLIAMSON. Yes, sir.

The CHAIRMAN. Will you state what the cause of some of the deterioration of that floor was?

Mr. WILLIAMSON. Well, it is partly, I think, owing to the lumber used, and I think there must have been some dampness in the concrete.

The CHAIRMAN. Is there any way to arrest that now?

Mr. WILLIAMSON. No, sir, only by renewing it and laying new floors. We have been patching them.

The CHAIRMAN. Do you know about what the repairs to all the floor that has dry rotted this way have been?

Mr. WILLIAMSON. I presume between five and six hundred dollars would pay all expenses thus far.

The CHAIRMAN. Is there much more that you think will have to be done?

Mr. WILLIAMSON. I think so; yes, sir. Some floors will have to be renewed entirely.

The CHAIRMAN. In doing what you think will be necessary to be done, what do you suppose the entire cost will be?

Mr. WILLIAMSON. That would be a very difficult matter to come at at this present time.

The CHAIRMAN. In how many buildings has this trouble occurred?

Mr. WILLIAMSON. In five or six buildings at this time there is more or less floor rotting.

The CHAIRMAN. Does that happen quite often in the construction of buildings where wood is laid on concrete floors?

Mr. WILLIAMSON. No, sir; it is something I have never seen before on floor laid over concrete.

The CHAIRMAN. From your examination of those floors, does it seem to you that the pine flooring was not of sufficiently good quality? Do you think that has something to do with it?

Mr. WILLIAMSON. I think that has pretty much all to do with it.

The CHAIRMAN. What was the matter with the pine?

Mr. WILLIAMSON. Sap.

The CHAIRMAN. It was not dry enough?

Mr. WILLIAMSON. Well, it was sap, and another thing, I think, the floor was dried entirely too much—all the life taken out of it.

The CHAIRMAN. Is that the kind of timber that they usually use for flooring purposes?

Mr. WILLIAMSON. Some places, sir; not all places. We have heretofore always used Georgia pine.

The CHAIRMAN. What kind of pine did you say this was?

Mr. WILLIAMSON. I would term this Virginia pine, sir—a good quality of Virginia pine—which will last very well over an ordinary floor.

The CHAIRMAN. Does it require a better quality of pine to be laid on a concrete floor than it does on what you call an ordinary floor?

Mr. WILLIAMSON. It appears so in this case. I never had very much experience in laying floor over concrete until a few years back. Prior to this we always used Georgia pine, five-quarter.

The CHAIRMAN. What does five-quarter pine mean?

Mr. WILLIAMSON. An inch and an eighth thick, cut out of inch and a quarter stuff.

Mr. HAY. Mr. Williamson, if the timber used in these floors had been properly inspected before it was put down, would that have made any difference?

Mr. WILLIAMSON. I believe that they were inspected by the superintendent who had the buildings under charge.

Mr. HAY. My question is if it had been properly inspected. Suppose you had done it. You are a carpenter. You know more about those things.

Mr. WILLIAMSON. I would not have that kind of floor put in there.

Mr. HAY. You would not?

Mr. WILLIAMSON. No, sir.

The CHAIRMAN. You would have put down a more expensive flooring?

Mr. WILLIAMSON. I would, and it will pay in the long run.

Mr. HAY. And thereby would have saved money?

Mr. WILLIAMSON. Yes, sir.

The CHAIRMAN. The superintendent you speak of was Dr. White's predecessor, was he not?

Mr. WILLIAMSON. No, sir; the superintendent of the building was Mr. Mitchell, who was appointed by the Secretary of the Interior to look after the buildings specially. Consequently it throwed me outside. I had nothing at all to do with it. Previous to that all buildings that were put up there I inspected and looked after myself.

Mr. HAY. Mr. Williamson, who was this superintendent you speak of? Was he an expert, or what was he?

Mr. WILLIAMSON. He was supposed to be. I suppose so. I had no acquaintance with him until he came there.

Mr. HAY. Was he a regular employee of the Interior Department or just picked up for that particular purpose?

Mr. WILLIAMSON. He was picked up for that particular purpose and appointed to look after the buildings.

Mr. HAY. Appointed, you say, by the Secretary of the Interior?

Mr. WILLIAMSON. I think so; yes, sir.

Mr. HAY. Was he appointed by the Secretary of the Interior or by the superintendent of the asylum, or do you know?

Mr. WILLIAMSON. No, sir; he was appointed by the Secretary of the Interior, or it was reported that fact, that he was appointed by the Secretary of the Interior. I presume he was.

Mr. HAY. You were not consulted at all about the material, and were not asked to inspect it?

Mr. WILLIAMSON. Not a particle; only I should say that Dr. White, when he came there, requested me to go in and look after it, which I did, and on one occasion I was very politely ordered out.

Mr. SMYER. By whom?

Mr. WILLIAMSON. By one of the men working in there.

The CHAIRMAN. One of the contractor's men—one of the men who were doing the work?

Mr. WILLIAMSON. Yes, sir.

Mr. HAY. Mr. Williamson, how about the work generally in the buildings? How is that done?

Mr. WILLIAMSON. It don't seem to stand the test, sir.

Mr. HAY. All the carpenter work and plastering, too?

Mr. WILLIAMSON. No, sir. We have had several patches to fall in the buildings from the ceilings.

Mr. HAY. How old are these buildings?

Mr. WILLIAMSON. About three years old or a little over—about three years old.

Mr. HAY. They ought to have lasted a long time, ought they not?

Mr. WILLIAMSON. Oh, yes. I don't see why they shouldn't, if they were properly done.

Mr. HAY. Are there any new buildings being constructed out there?

Mr. WILLIAMSON. No, sir.

Mr. HAY. When these buildings were completed, do you know who accepted them?

Mr. WILLIAMSON. I do not.

Mr. HAY. Do you know whether it was done by this man you speak of, who acted as superintendent?

Mr. WILLIAMSON. I presume he was one of them. I don't know.

Mr. HAY. You do not know anything about that?

Mr. WILLIAMSON. No, sir.

The CHAIRMAN. Did not the Supervising Architect, Taylor, have something to do with the construction of those buildings?

Mr. WILLIAMSON. I can't say, sir. I don't know him.

Mr. HAY. Who drew the plans; do you know?

Mr. WILLIAMSON. That I don't know.

Mr. HAY. Do you know anything about the plumbing?

Mr. WILLIAMSON. No, sir; I can't say I am a competent judge of that.

Mr. HAY. How many floors did you say you will have to renew?

Mr. WILLIAMSON. I couldn't say how many, but there is quite a number of them.

Mr. HAY. You said you could not tell how much it would cost?

Mr. WILLIAMSON. No, sir; not without making an estimate—going over it and making an estimate of what really would have to come out. I am taking one out now.

Mr. HAY. You are taking one out now?

Mr. WILLIAMSON. Yes, sir; or at least it is all taken out and we are laying a new one.

Mr. HAY. How many of the new buildings are there?

Mr. WILLIAMSON. I think 14, all told.

Mr. HAY. And this same condition obtains in all of them?

Mr. TAYLOR. No; in some of them they are tolerably fair. They are not broke through. Quite a number of them have broken places in the floor that we have to cut out and that really will have to be renewed soon.

The CHAIRMAN. In the construction of new buildings, does it not sometimes happen that no matter how much care is exercised, at times plaster will fall, for practically no reason? Does not that happen every now and then in the construction of new buildings?

Mr. WILLIAMSON. Well, no; I don't think it is natural to follow, where the work is thoroughly done. The contract system is rather a bad system to work on, anyhow, for the Government.

The CHAIRMAN. You say the contract system is a bad system to work on?

Mr. WILLIAMSON. Yes, sir; that is, in building.

The CHAIRMAN. In other words, you always get better results by erecting any building by day's labor?

Mr. WILLIAMSON. I think so; yes, sir.

The CHAIRMAN. But it always costs a good deal more.

Mr. WILLIAMSON. It costs a little more, yes, sir; but it is much better.

Mr. HAY. Mr. Williamson, where do you get your supplies? Do you buy them in the open market?

Mr. WILLIAMSON. Some in the open market, mostly by contract. This year it comes from Church & Stephenson.

Mr. HAY. What do you buy under contract and what do you buy in the open market?

Mr. WILLIAMSON. For instance, oak, and 2 by 4's, scantling, etc. That would be about the principal things, something that we didn't use a great deal of, and then when we buy we generally go around to two or three yards and price it and get it wherever we get it cheapest.

Mr. HAY. Do you buy that yourself?

Mr. WILLIAMSON. Sometimes. Sometimes Mr. Offutt buys it.

Mr. HAY. You tell him what you want?

Mr. WILLIAMSON. Yes; and sometimes he is pushed so he can't get around, and he sends me to select out, which I think pays every time.

Mr. HAY. With regard to these floors you are renewing over there, is there any danger that the same thing will happen if you do not change the concrete?

Mr. WILLIAMSON. I think not. I think if we use Georgia pine it will be all right. I have, for an experiment, by the permission of Dr. White, laid one floor of Georgia pine—as a kind of experiment.

That has been laid some four or five months, and there is nothing showed through that as yet. It is all right.

Mr. HAY. It would cost a good deal to renew the concrete, I suppose.

Mr. WILLIAMSON. Yes; it would cost pretty considerable.

Mr. HAY. Georgia pine is more expensive than the other?

Mr. WILLIAMSON. Oh, yes.

The CHAIRMAN. Mr. Williamson, as a matter of fact, the deterioration did not show in these floors until about a year after they were laid, did it?

Mr. WILLIAMSON. No, sir. I think it was about a year ago.

The CHAIRMAN. I say until a year after it was laid, because there was a clause in the contract.

Mr. WILLIAMSON. After the first year it began to show some defects.

Mr. WALLACE. What is the cost of the flooring you are now laying?

Mr. WILLIAMSON. The Georgia pine flooring will now cost about \$60 a thousand.

Mr. WALLACE. But you say you have taken out the old flooring and are putting in a new one in one of the buildings. What will that cost for that one building?

Mr. WILLIAMSON. This floor I am putting in is what they call North Carolina pine. I want to try that. That is a little harder pine. It is only a small room, and I am putting that in of North Carolina pine.

Mr. WALLACE. But the point I want to get at is what would be the cost of that? How much will it cost to take out the old floor and put in the new one that you are are putting in there?

Mr. WILLIAMSON. Probably of Georgia pine, it will cost \$30.

Mr. WALLACE. A floor?

Mr. WILLIAMSON. Yes, sir.

The CHAIRMAN. It costs what, \$30?

Mr. WILLIAMSON. About \$30.

The CHAIRMAN. For what?

Mr. WILLIAMSON. That is a small room, a room probably 10 by 12.

The CHAIRMAN. When you spoke of Georgia pine being \$60 a thousand, you meant just as you receive it? You did not mean laid, did you?

Mr. WILLIAMSON. Oh, no; just as we buy it.

The committee (at 11.45 o'clock a. m.) adjourned until Wednesday, June 6, 1906, at 10 o'clock a. m.

HOUSE OF REPRESENTATIVES, *June 6, 1906.*

The committee met at 10 o'clock a. m.

Present: Messrs. Olcott (chairman), Smyser, Hay, and Wallace; also Dr. White, Mr. Evans, Dr. Emmons, and others.

TESTIMONY OF F. E. TENNYSON.

F. E. TENNYSON, being duly sworn, was examined and testified as follows:

The CHAIRMAN. What is your name?

Mr. TENNYSON. F. E. Tennyson.

The CHAIRMAN. Are you an attendant at St. Elizabeth's?

Mr. TENNYSON. Yes, sir.

The CHAIRMAN. How long have you been there?

Mr. TENNYSON. Nine years.

The CHAIRMAN. What ward are you in now?

Mr. TENNYSON. I am in P Building, 1.

The CHAIRMAN. Is that the ward over which Dr. Stack is the chief physician?

Mr. TENNYSON. No, sir.

The CHAIRMAN. Who is the physician?

Mr. TENNYSON. Dr. Logie has charge there.

The CHAIRMAN. How often does Dr. Logie visit the wards there?

Mr. TENNYSON. About twice a day.

The CHAIRMAN. How patients are there in your ward?

Mr. TENNYSON. Thirty patients.

The CHAIRMAN. What kind of patients are they?

Mr. TENNYSON. Well, they are young sailors and soldiers—a pretty quiet class of patients.

TESTIMONY OF R. C. TRUMAN.

R. C. TRUMAN, being duly sworn, was examined and testified as follows:

Mr. HAY. Mr. Truman, what ward are you on?

Mr. TRUMAN. Poplar ward.

Mr. HAY. Who is the physician in charge of that ward?

Mr. TRUMAN. Dr. Stack.

Mr. HAY. How often does Dr. Stack go through that ward?

Mr. TRUMAN. Two or three times a week.

Mr. HAY. No oftener than that?

Mr. TRUMAN. No; not to my knowledge, sir.

Mr. HAY. What class of patients have you in that ward?

Mr. TRUMAN. They are very straight, very quiet.

Mr. HAY. Are they patients whom the physician ought to see every day?

Mr. TRUMAN. No, indeed; not at all.

The CHAIRMAN. Who is the other physician on that ward?

Mr. TRUMAN. Dr. Glasscock.

The CHAIRMAN. How often does he go through?

Mr. TRUMAN. Nearly every day. Sometimes he might miss.

The CHAIRMAN. Do either of the physicians ever come there twice a day?

Mr. TRUMAN. Yes; sometimes.

The CHAIRMAN. If there is anything the matter and you send for them, they come, do they not?

Mr. TRUMAN. Yes, sir.

The CHAIRMAN. How many patients are there?

Mr. TRUMAN. I have 11.

The CHAIRMAN. Is there any other person on the ward with you?

Mr. TRUMAN. Yes, sir; I have another attendant.

The CHAIRMAN. There are two attendants?

Mr. TRUMAN. Two.

The CHAIRMAN. If the patients are of a good class and do not give any trouble what is the occasion for having two attendants?

Mr. TRUMAN. They are a pretty good class of patients.

The CHAIRMAN. I say, what is the use of having two attendants?
Mr. TRUMAN. One has to be away very often and he is relieving on other wards a good bit of his time.

TESTIMONY OF MR. E. BROWN.

E. BROWN, being duly sworn, was examined and testified as follows:

The CHAIRMAN. What ward are you on?

Mr. BROWN. I am on Cypress ward now, sir.

The CHAIRMAN. How long have you been there?

Mr. BROWN. About a week to-day.

Mr. HAY. What ward were you on before that?

Mr. BROWN. Garfield, first.

The CHAIRMAN. Who is the physician in charge of that Garfield first?

Mr. BROWN. Dr. Stack.

The CHAIRMAN. Does Dr. Stack go through your wards often?

Mr. BROWN. Yes, sir; I see Dr. Stack quite often; most of the time about five times a week; sometimes may be more than that.

The CHAIRMAN. How many patients are there in that ward?

Mr. BROWN. Thirty-six. There was only 24 before they made the change in the ward. After they moved the wards there is 36 now.

The CHAIRMAN. What class of patients are they?

Mr. BROWN. I might say they are all near about the same thing. There is no real bad patients.

The CHAIRMAN. Are any of them bed-ridden?

Mr. BROWN. How is that?

The CHAIRMAN. Do any of them have to stay in bed all the time?

Mr. BROWN. No; there is none of them has to stay in bed at all.

The CHAIRMAN. How many are there of you on that ward?

Mr. BROWN. Three.

The CHAIRMAN. Does that mean three day attendants?

Mr. BROWN. Yes, sir.

Mr. HAY. What is the character of the food, Mr. Brown?

Mr. BROWN. Sometimes the food is good, sometimes indifferent.

Mr. HAY. How often is it good and how often is it indifferent?

Mr. BROWN. I guess most of the time it is not so good.

Mr. HAY. You say the majority of the time it is bad?

Mr. BROWN. Yes, sir.

Mr. HAY. What is the matter with it?

Mr. BROWN. I couldn't say whether the food was not good before it was cooked, or it is the way it is cooked. I couldn't say.

Mr. HAY. What is the character of it? What is wrong about it?

Mr. BROWN. Well, it doesn't taste very good and it doesn't smell very good.

Mr. HAY. What do you have to eat for breakfast, for each meal?

Mr. BROWN. Well, rice, beef, and bread.

Mr. HAY. How is the beef?

Mr. BROWN. They are fairly good; and coffee. We sometimes have tea.

Mr. HAY. You say it does not smell good? What does not smell good, the beef?

Mr. BROWN. The beef and sometimes the meat.

Mr. HAY. You have the same food as the patients, I suppose, or they have the same food as you have?

Mr. BROWN. Well, sometimes; yes.

Mr. HAY. Is their food as good as yours, or is it the same, or what?

Mr. BROWN. I don't see much difference in it; no, sir. There is some difference sometimes, but very little difference.

Mr. HAY. Are the patients under you soldiers?

Mr. BROWN. Some of them are soldiers; yes, sir.

Mr. HAY. What do you say about whether you have sufficient help there?

Mr. BROWN. Sometimes we do and sometimes we don't. There is three of us on there together most of the time, and sometimes there is two, and at the necessary call for a short time there is one.

TESTIMONY OF MACK DULANEY.

MACK DULANEY, being duly sworn, was examined and testified as follows:

Mr. HAY. How long were you an attendant at St. Elizabeth's?

Mr. DULANEY. From September, 1901, to May 1, 1906.

Mr. HAY. Why did you leave there, Mr. Dulaney?

Mr. DULANEY. I resigned.

Mr. HAY. Voluntarily?

Mr. DULANEY. Yes, sir.

Mr. HAY. Mr. Dulaney, do you know anything about the treatment there of a man named John Hughes?

Mr. DULANEY. He was on the ward I was on for a while; yes, sir. He was treated all right.

Mr. HAY. He was treated all right?

Mr. DULANEY. Yes, sir.

Mr. HAY. I have no further questions. I was informed Mr. Dulaney had something to say about this matter.

TESTIMONY OF T. L. MARR.

T. L. MARR, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Are you an attendant at St. Elizabeth's now?

Mr. MARR. Yes, sir.

The CHAIRMAN. How long have you been there?

Mr. MARR. Two years and three months or a little over.

The CHAIRMAN. What ward are you on?

Mr. MARR. Dawes, first.

The CHAIRMAN. Who is the physician in charge of that ward?

Mr. MARR. Dr. Stack.

The CHAIRMAN. Does he visit your ward frequently?

Mr. MARR. Two or three times a week, and sometimes oftener.

The CHAIRMAN. Who is the assistant physician there?

Mr. MARR. Dr. Glasscock.

The CHAIRMAN. Does he come there often?

Mr. MARR. He comes through every evening.

The CHAIRMAN. Does not either of them come there regularly in the morning?

Mr. MARR. Sometimes.

The CHAIRMAN. What kind of patients have you there?

Mr. MARR. They are mostly all old men, chronic cases.

The CHAIRMAN. Are they quiet?

Mr. MARR. Mostly.

The CHAIRMAN. Do any of them have to stay in bed all the time?

Mr. MARR. No, none of them are in bed.

The CHAIRMAN. Do you ever have any particular trouble with any of them?

Mr. MARR. No, indeed.

The CHAIRMAN. If there ever is any trouble and you send for a doctor does the doctor come quickly?

Mr. MARR. Mostly, yes.

Mr. SMYER. What do you mean by "mostly, yes?"

Mr. MARR. Yes, he comes when we send for him.

Mr. SMYER. All the time or just occasionally?

Mr. MARR. As soon as ever we send for him.

Mr. HAY. What have you to say about the food there?

Mr. MARR. Sometimes it is very good and then again it is not so good.

Mr. HAY. How often is it good and how often is it bad?

Mr. MARR. It is all about the same, I guess. It is about equal.

Mr. HAY. What is the matter with it? What is wrong with it?

Mr. MARR. It is not cooked so very good, mostly.

Mr. HAY. How many are there on the ward with you?

Mr. MARR. Attendants?

Mr. HAY. Yes.

Mr. MARR. Two at present.

Mr. HAY. How many patients do you say you have?

Mr. MARR. I have got 35.

Mr. WALLACE. Are your patients old?

Mr. MARR. Yes, sir; most of them.

Mr. WALLACE. Bad cases?

Mr. MARR. A good many of them haven't any teeth.

The CHAIRMAN. Do these men who have no teeth get a special diet?

Mr. MARR. No; not of late they have not.

The CHAIRMAN. Do they not get milk and eggs?

Mr. MARR. They get milk, yes; and eggs occasionally.

The CHAIRMAN. Is not that a special diet? Is not that different from what the others get?

Mr. MARR. Some of them get toast—the others.

Mr. HAY. How often do they get eggs and milk?

Mr. MARR. They get milk every morning.

Mr. HAY. How often do they get eggs?

Mr. MARR. They get them sometimes.

Mr. HAY. What do you mean by sometimes—once a week; twice a week?

Mr. MARR. Yes; about that.

Mr. HAY. Three times a week?

Mr. MARR. About twice a week.

Mr. SMYER. What do you mean about the food not being cooked? Do you mean generally it is not well cooked?

Mr. MARR. Yes.

Mr. SMYER. That is, three times a day?

Mr. MARR. Yes.

Mr. SMYSER. Did you ever call anybody's attention to it?

Mr. MARR. They have several times.

Mr. SMYSER. Have you?

Mr. MARR. Yes, I have.

Mr. SMYSER. Whose attention did you call to it?

Mr. MARR. The supervisor's.

Mr. HAY. Who is he?

Mr. MARR. Mr. Burch and Mr. Goddard.

Mr. SMYSER. Did that make any change in the cooking?

Mr. MARR. Not so much.

Mr. SMYSER. Did it make any?

Mr. MARR. A little, at times.

Mr. SMYSER. So day in and day out the material is not well cooked. Is that it?

Mr. MARR. Yes.

Mr. SMYSER. Don't you, on a chance shot, get a meal that is pretty well cooked?

Mr. MARR. Not very often.

The CHAIRMAN. Do the patients get the same class of food as the attendants do?

Mr. MARR. Pretty much the same. The attendants are a little better, sometimes.

The CHAIRMAN. The patients' food is better?

Mr. MARR. Some of it.

Mr. SMYSER. Is the patient's food not well cooked?

Mr. MARR. It is cooked along about the same as the attendants.

TESTIMONY OF WILLIAM B. BARRY.

WILLIAM B. BARRY, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Are you connected with St. Elizabeth's now?

Mr. Barry. No, sir.

The CHAIRMAN. You were at one time, were you not?

Mr. BARRY. Yes, sir. I have been away from there a year the 1st of this present month.

The CHAIRMAN. What was your position there when you left?

Mr. BARRY. I was designated on the pay roll as in charge of the tailoring department. My duties were—I had charge of the women's workroom and the men's workroom—bed linen, clothing, napkins, etc., in charge of storehouse accounts.

The CHAIRMAN. Was it your duty to distribute the clothing and linen and keep track of it?

Mr. BARRY. Yes, sir.

The CHAIRMAN. Were you also at the head of the repair department?

Mr. BARRY. Yes, sir.

The CHAIRMAN. How many men were there under you, or men and women?

Mr. BARRY. Altogether about 23.

The CHAIRMAN. Did any patients do any work in your department?

Mr. BARRY. Yes, sir; I had anywhere from 8 to 20 working. That is, they wouldn't work regularly.

The CHAIRMAN. What were they—women?

Mr. BARRY. Women and male patients both.

The CHAIRMAN. You say you had charge also of the storehouse accounts?

Mr. BARRY. Yes, sir.

The CHAIRMAN. Does that mean you checked off the stores that came into the hospital?

Mr. BARRY. No, sir; that means I had charge of a system of accounts that was in vogue when Dr. White arrived there. It was instituted by myself at the request of Dr. Richardson. That is, he brought a system from Massillon, Ohio, which was entirely inadequate for St. Elizabeth's on account of its enormity, the number of wards and departments, and this system was in vogue at the time of Dr. White's coming.

The CHAIRMAN. You left the hospital voluntarily, did you not?

Mr. BARRY. Oh, yes.

The CHAIRMAN. You resigned?

Mr. BARRY. Oh, yes.

Mr. HAY. Did you have any reason specially for resigning?

Mr. BARRY. Yes, sir; I was going in business, and that is nothing in regard to the institution. I have no satisfaction at all whatever.

Mr. HAY. What was your pay while you were there?

Mr. BARRY. Nine hundred dollars.

Mr. HAY. Do you know who does the work you did out there?

Mr. BARRY. No, sir; I do not; I don't know personally. I have only been told. Naturally I would inquire what has been going on; but that I don't think I ought to state here.

Mr. HAY. Who succeeded you; do you know?

Mr. BARRY. I know a gentleman by the name of Mr. Sanger. That is all. I don't know the gentleman. I don't know that I ever saw him.

Mr. HAY. You do not know what he is paid?

Mr. BARRY. No, sir; I do not.

The CHAIRMAN. How long were you in the institution?

Mr. BARRY. I went there in 1885. My first enlistment there was up until the 15th of March, 1891. Then I was away fifteen months as superintendent of the University Club and returned in 1892 and took charge of the position which I held when I left in 1893. In fact, I returned for that purpose. That was the understanding when Dr. Godding asked me to come back.

Mr. HAY. You stayed there from that time until you resigned?

Mr. BARRY. Up to the time I resigned, covering about thirteen years' service, I think it is, in the one department. I would like to add, gentlemen, in connection with that, that I instituted this work that is now being done there. They had two sewing machines when I took charge, and I think to-day they have 21 or 22. The clothing at that time was cut in the institution and sent out.

Mr. SMYER. To be made?

Mr. BARRY. To be made; yes, sir.

The CHAIRMAN. And you instituted the system of having most of it made in the institution?

Mr. BARRY. Yes, sir. Dr. Godding, on appointing me to the position, said: "Now, Mr. Barry, I expect great things of you." He said, "We have never got from this department what we should have gotten. Now, I expect you to install a system here by which we will have all this

clothing made in the shop, for the simple reason that all who come here are mostly widows and soldiers' widows, at that, and they are all equally deserving. We can't supply all, and for that reason I prefer to have the work done in here." So that necessitated the employment of two girls, who were placed in the female sewing room at that time to work on cloth work, such as blouses and coats.

The CHAIRMAN. What do you think generally of the conduct of that institution?

Mr. BARRY. The general conduct I don't think I am in a position to state, only what concerns my immediate department.

The CHAIRMAN. Concerning your immediate department then, what have you to say?

Mr. BARRY. In my immediate department, there are some things that I thought, if I was running the place myself, I would run it a little different.

The CHAIRMAN. In what respect?

Mr. BARRY. I should say that by the system that was instituted there—I don't want to appear biased on the subject—but you have a means of knowing what becomes of your goods after they are once received into the institution. That is, a ready means of knowing. Understand me clearly about that.

They have a ledger with all the departments printed across the top, and, the requisitions being made out from each department, has the entry made under that department. If I am not mistaken, it is absolutely necessary on account of the departmental rule requiring the condemnation of articles and keeping a record of it. By having this book I now speak of, when a new order comes down you enter under that particular department, in black ink, and if it were destroyed or condemned, as the order would read on its headlines, "exchange order," you would then enter it in red ink. For instance, in any particular department, say, they have 21 beds, which is rather an odd number for me to mention, but it happens, just the same. The necessary bed linen required for that department is generally known to the attendant in charge, for the reason that there is an inventory taken, which I had charge of, for the entire institution at the close of the fiscal year. You could tell by looking at your ledger if he had an order entered there in black ink. If it was for six sheets, for instance, here is an inventory at the end; and if you found he did not have those six, they went through some improper channel. If there were six, or say three, entered in red ink, that would replace those three, and he would still have the same number he originally started with.

The CHAIRMAN. That is, the entry in red ink would mean the three sheets had been destroyed?

Mr. BARRY. Yes, sir; and that is certified to, or used to be—I don't know about the system to-day—by a committee who looked after that.

The CHAIRMAN. Whom does the committee consist of? Do you mean some of the board of visitors?

Mr. BARRY. No, sir; it was usually selected by some of the older employees, and if I am not mistaken, I think the present sergeant of the precinct in Anacostia was present at the time. I am sure I saw him at such intervals.

The CHAIRMAN. Is not this same system of bookkeeping that you inaugurated in vogue there now?

Mr. BARRY. No, sir; I think not. A portion of it is. Since I left I understand it is being kept up; for instance, in the kitchen sheets—and I think Dr. White will bear me out in that—you have an excellent idea of telling whether one is getting more in excess of another, any one kitchen according to the population. I also used to make out a report to Dr. Richardson showing the per capita consumption on these kitchen sheets, which was quite handy. There were about 183, if I am not mistaken about that, of articles most used, and that daily order coincides with the headlines of this kitchen sheet. There were six kitchens at this time, and you could go down to your total, with the population on the left-hand side, and make a very fair comparison whether one kitchen was getting in excess over the other.

The CHAIRMAN. When you talk about the kitchen now, are you talking about food supplies?

Mr. BARRY. This is in connection with the books.

The CHAIRMAN. Yes, I know.

Mr. BARRY. This was first inaugurated for the purpose of not using up 30 lines per month in the ledger. You see it would exhaust the ledger, and they would cost somewhere between 25 and 30 dollars. They would exhaust the ledger rather quickly, and for that reason these sheets were adopted and used as a report later.

Mr. HAY. Mr. Barry, do I understand you to say that under the system inaugurated by you all condemned articles were disposed of in some way, or you kept an account of all condemned articles?

Mr. BARRY. We kept an account of all condemned articles.

Mr. HAY. What became of all condemned articles?

Mr. BARRY. They went to what was called a condemning room, and this committee I speak of came around and certified as to their being destroyed, being unfit for use.

Mr. HAY. You say the object of that was to keep all supplies in a proper channel. Is that the idea?

Mr. BARRY. If I understand you correctly, to have a proper channel or have it known what channel they were passing out.

Mr. HAY. So that in order for these supplies to be kept trace of you had to keep an account of those that were condemned?

Mr. BARRY. An account of each separate department; otherwise at the end of the year in going over your inventory book, which I don't know whether that is being kept now or not, you could make a fair comparison. You could take your inventory sheet, reading "furniture and fixtures," which covers anywhere from one hundred to three or four hundred different articles usually used in a house.

Mr. HAY. Was that system of condemned articles done away with while you were there?

Mr. BARRY. Yes, so far as the way I kept it.

Mr. HAY. It was?

Mr. BARRY. Yes, sir. If I recall correctly, I believe on calling Dr. White's attention to it he said he was going to see if he could not have that done away with.

Mr. HAY. What was the object of doing away with it?

Mr. BARRY. It would obviate the necessity of keeping that account. It would cause an extra book in connection with the new system which we inaugurated later.

Mr. HAY. What was the new system which you inaugurated later which enables you to keep track of all these articles?

Mr. BARRY. None, so far making comparison. There was a memorandum turned in at the end of each month by the different departments, but about its accuracy I have my doubts.

Mr. HAY. Did you have the disposition of the clothing that came in?

Mr. BARRY. Yes, sir.

Mr. HAY. That was bought by the purchasing agent?

Mr. BARRY. Yes, sir.

Mr. HAY. Could not that clothing be bought by contract as well as in open market?

Mr. BARRY. I see no reason why.

Mr. HAY. It has been testified here that it could not be, because the people were not of the same size and it would be hard to buy it for that reason; that each man had to be supplied with a suit.

Mr. BARRY. From my limited experience, I can't see it.

Mr. HAY. You think it would be to the advantage of good administration to buy this clothing under contract, do you?

Mr. BARRY. Now, when it comes down to that, that is a question.

Mr. HAY. That is the point.

Mr. BARRY. I believe to-day you can go in and buy, say, a hundred or a hundred and fifty suits and get a better grade for the same amount of money than you could if you had a contract. Of course, that is only my private opinion about that, but I believe there are times, understand.

Mr. HAY. Then you think it is better administration to buy in the open market?

Mr. BARRY. No; I don't altogether agree with that. I think it would be better to run the chances and buy it by contract.

Mr. HAY. What class of goods did they buy?

Mr. BARRY. It was a very fair grade of cashmere and chevots.

Mr. HAY. How much did they buy each year? Do you know?

Mr. BARRY. Approximately, about 500.

Mr. HAY. How much clothing was manufactured in the institution?

Mr. BARRY. We made up about a thousand pair of blue kersey trousers—army trousers, for the old soldiers—and about 350 to 500 citizens' coats. That varied, of course. And about the same number of what you would call denim coats, used around the kitchens and working the patients on the outside; 2,000 drawers, about 1,800 undershirts, and 2,500 or 2,600, and sometimes as high as 3,000, check shirts.

Mr. HAY. Then as to the difference in the underclothing at different seasons; or would they wear the same all the year round?

Mr. BARRY. Starting about this season of the year they would dispense with the undershirt.

Mr. HAY. You dispensed also the food supplies, did you?

Mr. BARRY. No; I beg your pardon. I simply had the accounts. They were handed into the office, the orders, as they were disbursed and receipted for, and then passed into the office for entry.

TESTIMONY OF W. H. FORD.

W. H. FORD, being duly sworn, was examined and testified at follows:

The CHAIRMAN. Are you employed in St. Elizabeth's now, Mr. Ford?

Mr. FORD. Yes, sir.

The CHAIRMAN. What is your position there?

Mr. FORD. I am an attendant.

The CHAIRMAN. On what ward?

Mr. FORD. I am on B 2, the new building.

The CHAIRMAN. Who is the physician at the head of that?

Mr. FORD. Dr. Stack.

The CHAIRMAN. And Dr. Glasscock is his assistant?

Mr. FORD. Yes, sir; he is his assistant.

The CHAIRMAN. How often do those physicians visit the ward?

Mr. FORD. They are in there as high as three and four times a day in that ward.

The CHAIRMAN. How many patients are there there?

Mr. FORD. Twenty-two.

The CHAIRMAN. What kind of patients?

Mr. FORD. The majority of them are parole patients, men who have the freedom of the grounds. There are nine that have parole.

Mr. HAY. What have you to say about the food, Mr. Ford?

Mr. FORD. The food in the building I am in now is pretty fair. It is pretty good. It is warm when it comes up, and served in a respectable manner.

M. HAY. You say in the building you are in now?

Mr. FORD. Yes, sir.

Mr. HAY. How about the building you were in before?

Mr. FORD. I was in White Ash ward before.

Mr. HAY. How was it over there?

Mr. FORD. Over there it wasn't so good. It was probably from the quantity that was cooked. This place where I am eating now they cook in small quantities. There was a good many more in the other building to cook for, and being cooked in large quantities, it was probably not as good as the small quantities.

Mr. HAY. Are you served from the general kitchen in this place you are now in?

Mr. FORD. No, sir; not the general kitchen. From the kitchen of the building I am in now.

Mr. HAY. The trouble with the ward you were on before was that the food was badly cooked. Was that the only trouble?

Mr. FORD. Yes, sir; it wasn't properly cooked. That was the trouble, and that was more on account of such large quantities it was cooked in.

Mr. HAY. Was it served cold?

Mr. FORD. Yes, sir; by the time they would handle it and get it up to the dining room it would be cold.

Mr. HAY. That ward was served from the general kitchen, was it?

Mr. FORD. Yes, sir; from the general kitchen.

Mr. HAY. You never saw any instances of cruel treatment there, did you?

Mr. FORD. No, sir; I did not.

The CHAIRMAN. Did you ever know a man there by the name of Bastin, a patient?

Mr. FORD. Yes, sir; I knew him.

The CHAIRMAN. Bastin testified that a man by the name of Ford struck an old volunteer soldier with a strap. Did you ever do anything of that kind?

Mr. FORD. No, sir; I did not.

Mr. SMYSER. Do you know anything about it?

Mr. FORD. No, sir; I don't know anything at all.

Mr. SMYSER. When did you first hear of that story?

Mr. FORD. When I read it in the paper was when I first saw it or knew anything of it at all.

Mr. SMYSER. It is not true?

Mr. FORD. No, sir; it is not true; because no one treats a patient any better than what I do there.

Mr. HAY. Did you ever see any meat on the table that smelt bad?

Mr. FORD. On one occasion I did; yes.

Mr. HAY. How long ago is that?

Mr. FORD. That has been about a couple of years ago and over. I called the supervisor's attention to it, and he carried the matter further.

Mr. HAY. He did what?

Mr. FORD. He carried the matter to the doctor, the physician in charge.

Mr. HAY. It has not occurred again?

Mr. FORD. No, sir; it has not occurred again.

TESTIMONY OF C. W. KING.

C. W. KING, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Are you in St. Elizabeth's as an attendant?

Mr. KING. Yes, sir.

The CHAIRMAN. What ward are you on?

Mr. KING. Dawes, basement.

The CHAIRMAN. How long have you been there?

Mr. KING. A little over three years.

The CHAIRMAN. Who are the physicians?

Mr. KING. Dr. Stack.

The CHAIRMAN. And Dr. Glasscock.

Mr. KING. Yes, sir.

The CHAIRMAN. Do they visit your ward frequently?

Mr. KING. Yes, sir. Dr. Glasscock comes through most every day and Dr. Stack comes through two or three times a week.

The CHAIRMAN. What kind of patients have you there?

Mr. KING. They are mostly all old soldiers.

The CHAIRMAN. How many of them?

Mr. KING. Thirty-nine.

The CHAIRMAN. How many attendants?

Mr. KING. Two.

The CHAIRMAN. Two day attendants, and then there is a night attendant, is there not?

Mr. KING. No, sir.

The CHAIRMAN. Is there not a night attendant?

Mr. KING. No, sir.

The CHAIRMAN. Who takes care of the patients at night?

Mr. KING. Well, they have a man come through about every hour.

The CHAIRMAN. Are most of these patients in this ward bedridden? Do they have to stay in bed all the time?

Mr. KING. No, sir; they are all up in the daytime.

The CHAIRMAN. And they are a peaceable lot?

Mr. KING. Yes, sir.

The CHAIRMAN. What have you to say about the food?

Mr. KING. I think the food is fairly good.

The CHAIRMAN. Do the patients have the same character of food that the attendants do?

Mr. KING. About the same, I think. The attendants might be a little better.

Mr. SMYSER. You say fairly good?

Mr. KING. I think it is pretty good.

Mr. SMYSER. Considering the number of people that have to be fed there, and necessarily the manner in which the food must be prepared, what do you say?

Mr. KING. I guess it is as good as we could expect.

Mr. SMYSER. Have you been in any other institution?

Mr. KING. No, sir.

Mr. SMYSER. Are you married?

Mr. KING. No, sir.

Mr. SMYSER. Of course you realize the cooking for you people out there is not like it was when mother did the cooking.

Mr. KING. Yes, I know that.

Mr. SMYSER. And you bear that in mind when you say the food is pretty good, or fairly good?

Mr. KING. Yes, sir.

Mr. HAY. Do you get your food from the general kitchen, Mr. King?

Mr. KING. Yes, sir.

Mr. HAY. Do the patients on your ward get eggs?

Mr. KING. No, sir.

Mr. HAY. What do they get to drink; tea, coffee or milk?

Mr. KING. They get tea and coffee.

Mr. HAY. Do they get any milk?

Mr. KING. Some of them get milk; yes, sir.

Mr. HAY. Only some of them?

Mr. KING. Yes, sir.

Mr. SMYSER. Why is that?

Mr. KING. We have about twelve that get milk there, the feeblest ones.

Mr. HAY. Those who are sick?

Mr. KING. They are not sick, but the ones that the appetites are not so good.

Mr. HAY. The old ones, you mean?

Mr. KING. Yes, sir.

Mr. WALLACE. How is the food now compared with what it was three months ago?

Mr. KING. I don't see any difference.

Mr. WALLACE. Six months ago?

Mr. KING. It is about the same all the time.

Mr. WALLACE. Twelve months ago?

Mr. KING. Just about the same.

Mr. WALLACE. You do not see any material change?

Mr. KING. No, sir.

Mr. HAY. Do you get any fruit?

Mr. KING. What kind of fruit do you mean?

Mr. HAY. Any kind; apples, bananas, oranges.

Mr. KING. No, sir.

The CHAIRMAN. Don't you get apples?

Mr. KING. No; we get apple sauce and such as that.

The CHAIRMAN. Do you have any berries?

Mr. KING. Strawberries; yes, sir.

The CHAIRMAN. Grapes?

Mr. KING. Yes; last summer.

TESTIMONY OF PETER BAYER.

Peter BAYER, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Mr. Bayer, are you an attendant at St. Elizabeth's?

Mr. BAYER. Yes, sir.

The CHAIRMAN. How long have you been there?

Mr. BAYER. One month, sir.

Mr. HAY. How do you like the food out there?

Mr. BAYER. It is as good as we can expect, although I have noticed several times that the potatoes have not been cooked properly. Baked potatoes have come up that have been hard when I ate in the dining room. I don't eat in the dining room now. I eat on the ward. I am on the hospital ward now.

Mr. HAY. Who is in charge of that hospital ward?

Mr. BAYER. Dr. Stack.

Mr. HAY. How often does he come through that hospital ward?

Mr. BAYER. He comes through every night, sir.

Mr. HAY. Does Dr. Glasscock come through every day?

Mr. BAYER. Twice a day.

Mr. HAY. How many have you in that ward?

Mr. BAYER. We have 40—37 in bed.

Mr. HAY. How many have you on the ward with you as attendants?

Mr. BAYER. There are 2 women nurses and Mr. Teates, trained nurse, and 2 other attendants besides myself.

Mr. HAY. So you have 6 on that ward?

Mr. BAYER. Yes, sir.

TESTIMONY OF W. S. THRALL.

W. S. THRALL, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Are you employed in St. Elizabeth's?

Mr. THRALL. Yes, sir.

The CHAIRMAN. As an attendant?

Mr. THRALL. Yes, sir.

The CHAIRMAN. What ward are you in?

Mr. THRALL. Oak ward.

The CHAIRMAN. How long have you been there?

Mr. THRALL. Since October 21, 1903.

The CHAIRMAN. Have you been employed on that same ward all the time?

Mr. THRALL. No, sir; previous to that I was on Beech ward.

The CHAIRMAN. How long have you been on Oak ward?

Mr. THRALL. Since last July 1.

The CHAIRMAN. What class of patients are there there?

Mr. THRALL. The ward I am on now?

The CHAIRMAN. Yes.

Mr. THRALL. I think there is 12 parol patients and 14 unattended.

The CHAIRMAN. Are they quiet, generally?

Mr. THRALL. Yes, sir; very quiet. Sometimes we have a few patients, you know, untidy, and we dispense with those. We have to transfer them to other wards.

The CHAIRMAN. What class of patients were there in Beech ward?

Mr. THRALL. They were a young class of soldiers, you know, just received from the Philippines or some other station, and when they got there, in the course of a week or two weeks they were paroled. They were a very nice class of patients. Most of them were on parol. Most of them, you know, maybe stayed a month or something like that, and were discharged.

The CHAIRMAN. Did you ever see any cruelty practiced on the part of the attendants toward any of the patients?

Mr. THRALL. No, sir; I never saw any straitjackets or anything used since I have been there—not on my ward; but on several occasions I have seen patients where they tried to commit suicide, and for a few hours we had to keep the straitjacket on them.

The CHAIRMAN. You mean that canvas camisole?

Mr. THRALL. Yes, sir.

The CHAIRMAN. Did you ever see any of the attendants hit patients?

Mr. THRALL. No, sir; I never saw any attendants abuse patients while I was there.

Mr. HAY. What do you know about the food out there?

Mr. THRALL. The general run of food is all right, with the exception of the beef we get, you know. It is not properly cooked, and it is very tough. The coffee the patients receive is not as good as the attendants receive.

Mr. HAY. It is not as good as what?

Mr. THRALL. It is not as good as the attendants receive—that is, it is not as strong, you know. It is very weak.

The CHAIRMAN. Do any of the patients under you drink milk?

Mr. THRALL. Yes, sir; we receive three gallons of milk every day.

The CHAIRMAN. Do you get eggs?

Mr. THRALL. I haven't saw any eggs for a few months or more, or may be quite a while. We have several patients on the ward that pay extra money, you know, and work there. They receive a little better food.

Mr. SMYSER. Is that true of the whole time you have been there, young man?

Mr. THRALL. Yes, sir. Can I say something in regard to the hours?

Mr. HAY. Yes, if you want to.

Mr. SMYSER. Do you think the hours are too long?

Mr. THRALL. I think the hours are very long. I go on my ward in the morning at 6 o'clock and remain on until 9 p. m., and then I can't leave the ward at all. I am there forty-two hours out of forty-eight. That is very long for a man for the pay we are getting over there.

Mr. SMYSER. You get tired of those long hours?

Mr. THRALL. I think you get more than tired. It will make you bughouse in about six months.

The CHAIRMAN. What do you get paid?

Mr. THRALL. I am only receiving about \$30 now, and I am in charge of the ward.

The CHAIRMAN. How long have you been there?

Mr. THRALL. Two years and eight months.

The CHAIRMAN. Did you ever know of patients being bathed in the same water?

Mr. THRALL. No; we always change the water every time we bathe them.

Mr. SMYSER. Do you know of such a thing ever happening since you have been there?

Mr. THRALL. No, sir. I have always looked after that since I have been on the ward, and previous to that, on the ward I was on with Mr. Pumphrey, I always looked after the bathing and seen that every man was bathed, and always put his name down on paper and seen he was bathed right.

Mr. SMYSER. Do you think if your pay was a little greater you could stand the long hours?

Mr. THRALL. I don't know. Maybe we could put up with that; but you know a man staying on fifteen hours and can't go out, it is very hard on him. It is very hard on his nerves. I think it is something awful.

Mr. SMYSER. How old are you?

Mr. THRALL. Twenty-three.

Mr. SMYSER. That is pretty tough on a young man.

Mr. THRALL. I think it is pretty tough on the old, too, ins't it? I don't see how attendants like that, even if they want to get married, can get married on \$35 a month.

The CHAIRMAN. What do you stay there for?

Mr. THRALL. I am only staying there until I can get better.

Mr. SMYSER. Do you contemplate matrimony?

Mr. THRALL. Sir?

Mr. SMYSER. Do you contemplate getting married?

Mr. THRALL. I don't want to stay single all my life; and if I get married on \$35 I might just as well go and get a coffin and put a woman in it.

TESTIMONY OF CHARLES P. BICKSLER.

CHARLES P. BICKLER, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Are you employed in St. Elizabeth's now?

Mr. BICKSLER. Yes, sir.

The CHAIRMAN. As an attendant?

Mr. BICKSLER. Yes, sir.

The CHAIRMAN. How long have you been there?

Mr. BICKSLER. About twenty years.

The CHAIRMAN. What ward are you in?

Mr. BICKSLER. I am on Sycamore Ward.

The CHAIRMAN. How long have you been there?

Mr. BICKSLER. I have been on Sycamore about seventeen years.

The CHAIRMAN. How long did you say you had been in the hospital?

Mr. BICKSLER. About twenty years.

The CHAIRMAN. You have been in this same ward, Sycamore ward, for about seventeen years?

Mr. BICKSLER. Yes, sir; about seventeen years.

The CHAIRMAN. Are you one of the supervisors or are you just one of the attendants?

Mr. BICKSLER. No, sir; I am an attendant.

The CHAIRMAN. How many men are there in your ward?

Mr. BICKSLER. There is 21 now. Sometimes I have about 25.

The CHAIRMAN. What class of patients are there?

Mr. BICKSLER. They are a very good class of men. Most of them are paroled—all of them but about 5.

The CHAIRMAN. What do you think of the food in the hospital?

Mr. BICKSLER. I guess it is pretty good under the circumstances—the amount they have to cook and all. I don't find much fault with the food. Of course it is kind of coarse food.

The CHAIRMAN. Is it good, wholesome food, in your opinion?

Mr. BICKSLER. Sometimes the food is not cooked very well. The beefsteak gets very tough occasionally.

The CHAIRMAN. Have you ever talked with the supervisor about it?

Mr. BICKSLER. Yes, sir; I spoke to him about the meat sometimes.

The CHAIRMAN. It varies sometimes, does it not? Sometimes it is better than it is at other times?

Mr. BICKSLER. Yes, sir.

The CHAIRMAN. Do the patients in your ward get milk, some of them?

Mr. BICKSLER. There is a few of them get milk.

The CHAIRMAN. Those are the older ones?

Mr. BICKSLER. Some that haven't got very good teeth and are not very hearty.

The CHAIRMAN. Have you ever known of instances of cruelty to patients?

Mr. BICKSLER. No, sir; I have never witnessed anything like that. The patients are all treated well, so far as I know.

The CHAIRMAN. Generally speaking, the patients are in pretty good condition, are they not, considering their mental condition?

Mr. BICKSLER. Yes, sir.

The CHAIRMAN. Do the doctors pay proper attention to them?

Mr. BICKSLER. They come through there occasionally.

The CHAIRMAN. Who are the doctors?

Mr. BICKSLER. Dr. Stack and Dr. Glasscock.

The CHAIRMAN. How often does Dr. Stack come through?

Mr. BICKSLER. Dr. Stack may come through probably two or three times a week.

The CHAIRMAN. And how often Dr. Glasscock?

Mr. BICKSLER. And maybe Dr. Glasscock as often at that.

The CHAIRMAN. Is there ever a day goes by without some physician coming through the ward?

Mr. BICKSLER. Yes, sir; I suppose there is some days they don't come at all.

The CHAIRMAN. You say some of these patients are on parol?

Mr. BICKSLER. Yes, sir; about 16 of them out of the 21.

The CHAIRMAN. Sixteen out of 21?

Mr. BICKSLER. Yes, sir.

The CHAIRMAN. None of them need any constant medical care, do they?

Mr. BICKSLER. No, sir; not at all.

The CHAIRMAN. And if anything did happen to them and you sent for a physician, he would come, would he not?

Mr. BICKSLER. Yes, sir; he always has.

The CHAIRMAN. How many attendants are there with you?

Mr. BICKSLER. There is two of us.

The CHAIRMAN. Besides the night attendant? There is a night attendant besides?

Mr. BICKSLER. Yes, sir; a night man comes through every hour.

Mr. HAY. How many wards does he go through?

Mr. BICKSLER. He goes through all the wards on the west side, I believe.

Mr. HAY. How many wards are there?

Mr. BICKSLER. I think there is about 17 there.

Mr. HAY. And one man goes through all of them at night?

Mr. BICKSLER. Yes, sir; it takes him about an hour to get around, I think. He goes through every hour.

Mr. HAY. What is the class of patients on these other wards? Are any of them disturbed?

Mr. BICKSLER. On my ward?

Mr. HAY. No; on the other 16 wards.

Mr. BICKSLER. Well, some of them are, and some of them have night men on them that stay there regularly all night. He is the regular night watch. He goes through all the wards, I suppose, to see that the night men are attending to their duties.

The CHAIRMAN. It is not necessary to have a night man on your ward because the patients are all quiet?

Mr. BICKSLER. They are all quiet; yes, sir.

Mr. HAY. What have you to say about the time you have to stay on there?

Mr. BICKSLER. I think it is pretty long hours.

Mr. HAY. You have been there twenty years. What do you get now?

Mr. BICKSLER. \$35.

Mr. HAY. Do you know anything about any of the hours of any other institution?

Mr. BICKSLER. No, sir; I have never visited any other institution.

TESTIMONY OF JOHN K. PUMPHREY.

JOHN K. PUMPHREY, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. Mr. Pumphrey, are you an attendant at St. Elizabeth's?

Mr. PUMPHREY. Yes, sir.

The CHAIRMAN. How long have you been there?

Mr. PUMPHREY. I have been there thirteen years the 21st of this month.

The CHAIRMAN. What ward are you on now?

Mr. PUMPHREY. Beech ward.

The CHAIRMAN. How long have you been on that ward?

Mr. PUMPHREY. About five years.

The CHAIRMAN. What doctors have charge of it?

Mr. PUMPHREY. Dr. Stack and Dr. Glascock.

The CHAIRMAN. Do they come through the wards often?

Mr. PUMPHREY. Yes—well, three or four times a week. Dr. Glascock usually comes through every day if there is any patient there that needs any medical attention.

The CHAIRMAN. What class of patients have you?

Mr. PUMPHREY. I have a mild class of patients. It has been a convalescent ward up to about a week ago. Then they changed it to put mild chronic cases on there—young soldiers and sailors. Sometimes after a few months' treatment they are discharged. Most of them are paroled around the grounds.

The CHAIRMAN. Most of them are paroled?

Mr. PUMPHREY. They were at that time, but I have about 7 paroled at the present time. About a week ago they changed the class of men on that ward.

The CHAIRMAN. Then none of them are especially disturbed on that ward?

Mr. PUMPHREY. There is one man, Captain Swann, there. He gets right smart disturbed at times, you know, but then he is able to look after himself. He wouldn't do himself any harm or anything of that kind.

The CHAIRMAN. He is an old man?

Mr. PUMPHREY. Yes, sir.

The CHAIRMAN. He has been there a great many years, has he not?

Mr. PUMPHREY. He has been there since 1898, I think. I am not sure about that. It is somewhere along there, but he was in an institution before he came there for several years.

Mr. CHAIRMAN. What have you to say about the food?

Mr. PUMPHREY. About like the rest of them, I suppose. Sometimes we get it pretty good. Other times it is not so good. The class of men that I have, they get, I judge, better than the attendants get.

Mr. HAY. Do they get eggs and milk?

Mr. PUMPHREY. Sometimes we get eggs. Well, milk is only a special diet, in special cases.

Mr. HAY. The general class of patients get no milk?

Mr. PUMPHREY. Sometimes we have eggs there about once or twice a month. All of the patients get some eggs, you know.

Mr. HAY. Do you know anything about the rooms where the old soldiers smoke—the rooms set apart for that?

Mr. PUMPHREY. Yes, they have two rooms for that purpose, but they are badly ventilated. It is not a good place to go.

Mr. HAY. You say they are badly ventilated?

Mr. PUMPHREY. Yes, sir.

Mr. HAY. Were they ever closed up?

Mr. PUMPHREY. How do you mean, sir?

Mr. HAY. Were they ever ordered to be shut up?

Mr. PUMPHREY. I think so, at one time. I am not sure of that. I have heard it. I couldn't swear to it, because I never seen whether they were closed up or not. My duties generally take up most of my time, and I have about as much as I can attend to. I don't look after other people's affairs very much.

Mr. HAY. You heard that, but you do not know about it?

Mr. PUMPHREY. I heard it, but I don't know about it to be sure.

Mr. HAY. Are those rooms kept clean?

Mr. PUMPHREY. I only go in there occasionally. They are not kept very clean, I must say. The smoking rooms you are speaking of?

Mr. HAY. I am speaking of the smoking rooms, yes.

Mr. PUMPHREY. They are set apart from the hospital wards, you know. They are not near no hospital ward. They are down near the kitchen and the bake shop, I think.

Mr. HAY. In pleasant weather, all the men go out, do they not?

Mr. PUMPHREY. They all go out.

The CHAIRMAN. So they can smoke in the open air?

Mr. PUMPHREY. We aim to take them out as much as possible, get them out in the open air.

Mr. HAY. I suppose these smoking rooms are used when it is raining and cold?

Mr. PUMPHREY. Yes; when it is cold and rainy. When they want to smoke they can sit down and smoke and play cards.

Mr. HAY. Do they get pretty good smoking tobacco out there?

Mr. PUMPHREY. Yes, sir; fairly good. It looks pretty good. I don't use it myself. I never heard any complaint among the patients. Lots of patients use it.

The CHAIRMAN. Is the smoking room there as dirty as the average smoking room in a railroad train?

Mr. PUMPHREY. I have seen some pretty dirty ones in a railroad train. I couldn't say.

Mr. WALLACE. What do they smoke out there?

Mr. PUMPHREY. They smoke a kind of tobacco, something on the order of this Bull Durham—something like that. I don't know whether they call it fine cut or what.

Mr. WALLACE. What do they smoke it in?

Mr. PUMPHREY. They smoke it in pipes and cigarettes.

Mr. WALLACE. Cigarettes?

Mr. PUMPHREY. Yes; lots of them use cigarettes.

Mr. WALLACE. Do they have cigars?

Mr. PUMPHREY. If they have cigars they have to buy them themselves. They are not furnished with cigars, unless their friends send them a box of cigars or something like that.

Mr. HAY. You know nothing about any cruelty to patients there, do you?

Mr. PUMPHREY. No, sir; I haven't known any since I have been there.

Mr. HAY. As far as you know, they have always been treated kindly?

Mr. PUMPHREY. Always. I don't think they would have a man around there long that would treat them otherwise.

Mr. HAY. Have you known of instances of attendants being discharged because they did treat them cruelly?

Mr. PUMPHREY. Oh, yes; I have heard of it, sir, often.

LETTER FROM ILLINOIS ASYLUM FOR INCURABLE INSANE.

Mr. WALLACE. Mr. Chairman, I have here a letter that I ask may be inserted in the proceedings.

The letter referred to is as follows:

[Trustees, S. O. Spring, president, Peoria; E. M. Wayne, Delavan; K. M. Whitham, secretary, Aledo; superintendent, Geo. A. Zeller, M. D.; chief clerk, James R. Conway.]

ILLINOIS ASYLUM FOR THE INCURABLE INSANE,
1201 SOUTH BARTONVILLE,
Peoria, Ill., May 29, 1906.

C. M. EMMONS, M. D.,

Secretary Medico-Legal Society, Washington, D. C.

SIR: I have the honor to acknowledge your letter of May 23, and will state frankly at the onset that I can not tell you how we control our violent insane. That we do it, and do it honestly, conscientiously, and humanely, and without the employment of mechanical or medicinal restraint, is an assured fact, of which you are at liberty to convince yourself by a day or night inspection, previously announced or otherwise, as you choose. Our cottages are unlocked and access may be had to any of them. There is no "center" to pass through in this institution. Since you have been so kind as to ask for a detailed outline of our work, I take it that you will pardon me for stepping aside to include other measures than the abolition of restraint.

When I entered the service in 1902 a fight was waging against the institutions of Illinois, and the critics declared that the fight would continue, first, as long as brutality existed or was tolerated; second, as long as narcotics were administered; third, as long as mechanical restraint was employed; fourth, as long as bars and grating remained upon the bars and windows.

I was new in the work, fresh from a tour of duty of three years as a volunteer medical officer in the Philippines, during which I had disturbed the pleasant relations of more than one officer's mess by my stand against every form of cruelty toward the natives. My entire training was such as to cause me to revolt against the slightest intimation of severity against those unfortunates. My institution was filled with institutional rounders and hospital tramps. I saw within my first week that the service would never be reformed by them, and I resolutely rejected every such applicant. In the first year of my incumbency two of them murdered a patient in the cottage, and I had them thrown in jail without bail. I determined to try the gentler influence of woman and as fast as men retired from the service I substituted women upon the wards of men. By persistent classification and reclassification I have been able to place all but 1 of my 21 cottages in the hands of women attendants, until our present force consists of 140 women and only 18 men. This not only effectually disposed of cruelty, but has added immeasurably to the comfort of the inmates. Their behavior has improved, and their personal appearance is much neater than under former conditions.

The abolition of narcotics was easy, especially with the advent of a new and energetic physician on the women's side.

My other assistant, representing the old régime, kept administering chloral and hypodermics surreptitiously for some time, but the reorganization of the service ousted him and I now have a force in touch with the policy outlined, and when I say narcotics are abolished I mean it literally. Nothing of the kind is ever administered on any of the wards. It is not available to nurse or attendant. We have had brought to us from time to time patients to whom narcotics had been regularly administered for six or seven years in other institutions and the supply was cut off arbitrarily and they have become helpful human beings instead of dependent victims of the drug habit.

The abolition of mechanical restraint kept pace with these advances. Orders were issued withdrawing all apparatus from one ward after another until finally it was permitted upon one ward only for men and women, respectively. Into these were gathered all of the patients transferred from the other wards as the change progressed. Finally on September 25 of last year it was withdrawn entirely and no patient since that time has been in restraint or seclusion. In classifying we reduced the number of attendants on the better wards and added them to the violent wards without perceptible increase in number. What psychic power came to our aid I am not prepared to state, but here it is, a reality, with a daily average population of 1,650 insane, the culls of the 10,000 insane in Illinois, men and women who were sent us because other institutions were given an opportunity of unloading their troubles onto us.

We availed ourselves of such agencies as the immersion bath, but patience and gentleness have supplanted them all. We find that periods of great excitement are self-limited and of short duration, and our fixed policy of nonresistance soon leaves the patient without occasion

for the exhibition of violence. Mind you, all this is done within open buildings, for the removal of bars and grating followed step by step the other moves, until to-day the entire 1,650 inmates of this institution are kept without cell or cell room, without bar or grating on any door or window, and with every door in every room of every cottage standing open day and night.

We conduct our institution strictly upon the colony plan. Our employees are all quartered in the nurses' home and none lives on the wards. We have a distinct hospital organization within the institution and the sick are removed to the hospital as soon as symptoms warrant. The secret of our success is classification. We have but 1 per cent of consumptives, and these are segregated in tent colonies. Our entire force works under the eight-hour system, and in return for this unusual concession in the matter of hours we demand that this time be spent in actual work. By means of our minute classification we have been able to adopt the eight-hour schedule without increase in the cost of maintenance.

I appreciate your interest in these matters and, although telling more of myself than your letter indicates, I felt that a more thorough understanding could be had if all the facts were stated. I would be pleased to have you visit and inspect the institution at any time. We have been using the blue and ruby incandescent lights for a year and hope soon to be able to present some observations. Our epileptics are classified with reference to the epilepsy instead of the insanity, and we hope also to note decided improvements in their lives. Ours is the newest of the asylums of Illinois, and in departing from established precedents we feel sustained and encouraged by inquiries such as yours. If we are wrong we are open to conviction. If we are right we want it known in order that dependents other than those in our care may reap the benefits of the Bartonville system.

Very respectfully,

GEO. A. ZELLER,
Superintendent.

TESTIMONY OF S. P. TENNISON.

S. P. TENNISON, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Mr. Tennison, are you employed at St. Elizabeth's?

Mr. TENNISON. Yes, sir.

The CHAIRMAN. In what ward?

Mr. TENNISON. Elm ward.

The CHAIRMAN. How long have you been there?

Mr. TENNISON. I went there January 4. I have been there twenty years and about eight months altogether. I was away about eight months in that time. I suppose I have been there about twenty years and two months.

The CHAIRMAN. How long have you been in Elm ward?

Mr. TENNISON. Nine days.

The CHAIRMAN. What ward were you in before that?

Mr. TENNISON. Garfield, basement. We moved from the basement into Elm ward.

The CHAIRMAN. How long were you there?

Mr. TENNISON. I was there about a month and five days, sir.

The CHAIRMAN. What ward were you in before that?

Mr. TENNISON. Then I was on night duty there a year. Last year I was on night duty on that ward.

The CHAIRMAN. On the same ward, Garfield?

Mr. TENNISON. Yes, sir; then I went on day duty last November.

The CHAIRMAN. What were you on before you were in Garfield at all?

Mr. TENNISON. I was in Home 1, on the other side of the building.

The CHAIRMAN. Home 1?

Mr. TENNISON. Yes, sir; Home 1 and Home 2.

The CHAIRMAN. Did you ever know a patient there by the name of Kinsey?

Mr. TENNISON. Yes, sir; I have seen him.

The CHAIRMAN. Was he ever under you?

Mr. TENNISON. No, sir.

The CHAIRMAN. Was he ever a patient in your ward?

Mr. TENNISON. Yes; he was a while. When I went back there I went up on Sycamore ward, and I stayed there about three or four weeks. He was there then.

The CHAIRMAN. What sort of a fellow was he?

Mr. TENNISON. He seemed to be pretty straight at that time.

The CHAIRMAN. Did you ever have any trouble with him?

Mr. TENNISON. No, sir.

The CHAIRMAN. Did you know an attendant by the name of Thrift?

Mr. TENNISON. Yes, sir.

The CHAIRMAN. Did you work with him on the same ward?

Mr. TENNISON. No, sir.

The CHAIRMAN. Did you ever work with a man by the name of Moffett?

Mr. TENNISON. No, sir.

The CHAIRMAN. Or Lloyd?

Mr. TENNISON. No, sir.

The CHAIRMAN. Did you ever see any patients badly treated over there in the hospital?

Mr. TENNISON. I see one.

The CHAIRMAN. Who was he?

Mr. TENNISON. His name was Brown.

The CHAIRMAN. What was the name of the attendant who mistreated him?

Mr. TENNISON. Penn.

The CHAIRMAN. Was there a complaint made?

Mr. TENNISON. He kicked him, sir; and one of the physicians seen it, and he was discharged immediately it was done.

The CHAIRMAN. Did you ever see any other cruelty?

Mr. TENNISON. No, sir. I have seen tussles between patients, of course. Sometimes people is fighting, and you have to go in and separate them.

The CHAIRMAN. Did you ever see any unnecessary harshness used toward patients?

Mr. TENNISON. No, sir; only what was necessary.

The CHAIRMAN. When the patients get to tussling between them, a man has to go and separate them?

Mr. TENNISON. Yes, sir; and sometimes they turn on him. While they are fighting, he must be holding them, and sometimes he gets a black eye before he can separate them.

The CHAIRMAN. You mean one of the patients gives another patient a black eye?

Mr. TENNISON. No, sir; gives the attendant.

The CHAIRMAN. Were you ever attacked by a patient?

Mr. TENNISON. Many a time.

Mr. SMYSER. What did you do?

Mr. TENNISON. I would catch hold of him and hold him a while, and hold on to him until he would give up.

Mr. SMYSER. When he smacked you on the snoot once, what did you do?

Mr. TENNISON. I would catch hold of him and take him and make him sit down until he became quiet, and then he would forget it in a few minutes.

Mr. SMYSER. Did you not punch back?

Mr. TENNISON. No, sir; I don't strike them.

Mr. SMYSER. Are you sure?

Mr. TENNISON. Yes, sir; I am sure.

Mr. SMYSER. Why didn't you?

Mr. TENNISON. I ain't supposed to do that. Them people don't know what they are doing there. They are not responsible, and not being responsible they don't know what they are doing. If they were responsible and knew what they were doing they wouldn't do it, of course. If a man strikes me I know he don't know what he is doing, and then, of course, I don't strike him, because I know he don't know what he is doing and ain't liable for what he does.

Mr. SMYSER. If you were down here on the street and some fellow would slug you, you would slug back, would you not?

Mr. TENNISON. Probably I would.

The CHAIRMAN. How long ago was this attendant Penn discharged?

Mr. TENNISON. Last week, sir.

The CHAIRMAN. Did the thing happen last week?

Mr. TENNISON. Yes, sir.

The CHAIRMAN. And he was discharged immediately.

Mr. TENNISON. Yes, sir.

The CHAIRMAN. He was discharged at the same time the thing happened, in other words?

Mr. TENNISON. Yes, sir.

The CHAIRMAN. What doctor was it who saw him do it?

Mr. TENNISON. Dr. Fitch.

The CHAIRMAN. Did you know a man by the name of Hawkins?

Mr. TENNISON. Yes, sir.

The CHAIRMAN. Were you ever working with him?

Mr. TENNISON. No, sir; I worked all the time among the old, infirm, crippled, and blind, and that class of men. I stay with them all the time.

The CHAIRMAN. And the patients you have now are feeble and old?

Mr. TENNISON. Yes, sir; some blind, some with no limbs.

The CHAIRMAN. They do not give you much trouble, do they?

Mr. TENNISON. No, sir.

The CHAIRMAN. How is the food over there?

Mr. TENNISON. The food is very good.

The CHAIRMAN. Do the patients you take care of now have special food sometimes—milk and things of that kind?

Mr. TENNISON. Yes, sir; they have special food three times a day.

The CHAIRMAN. They do?

Mr. TENNISON. Yes, sir; they are on special diet.

The CHAIRMAN. What do they have—milk and eggs?

Mr. TENNISON. Sometimes they have eggs, but we don't have them regular. We have oatmeal and deserts of different kinds. There is always something extra, more than the regular diet.

The CHAIRMAN. Do they have no milk punches?

Mr. TENNISON. No, sir; no milk punches.

Mr. WALLACE. You speak of milk. Have they been getting that all the time?

Mr. TENNISON. Yes, sir. They don't all get milk at the same time, but I suppose there is enough. Milk comes for about seven or eight at one meal, and the next meal we give seven or eight more. That is, all the feeble get milk. When they are strong they get some other kind of food. Of course there is not enough milk to go all around.

Mr. WALLACE. How long has that been your custom?

Mr. TENNISON. The extra diet?

Mr. WALLACE. Yes.

Mr. TENNISON. The extra diet was the custom when I first went there.

Mr. WALLACE. They have kept it up until now?

Mr. TENNISON. Yes, sir. They still have extra diet among the old and feeble and weakly, those that has been in the hospital and come out. Of course they get extra diet.

The CHAIRMAN. Tell me a little more about this Penn. When he kicked the patient, what was the patient doing? What made him kick him; do you know?

Mr. TENNISON. He taken his night report book and hid it under his pillow, and when he found it, he come out of the room and of course he kicked him.

The CHAIRMAN. When did this happen; a week ago to-day?

Mr. TENNISON. I can't exactly remember. It was one day last week. Really I couldn't recall the day.

The CHAIRMAN. You say Dr. Fitch saw him?

Mr. TENNISON. Yes, sir.

The CHAIRMAN. What did Dr. Fitch say to him then?

Mr. TENNISON. He told him to give up his keys.

The CHAIRMAN. Right away?

Mr. TENNISON. Yes, sir; he had no more use for a man that would do that.

The CHAIRMAN. The man was discharged at once?

Mr. TENNISON. Yes, sir.

Mr. SMYSER. Where did he kick the patient?

Mr. TENNISON. Near the hip, I think, sir, as far as I could see.

Mr. SMYSER. Was the patient up?

Mr. TENNISON. Yes, sir. It was an ordinary kick. There was no bruise or nothing. He was examined, but it didn't leave a bruise or nothing.

The Committee (at 11.50 a. m.) adjourned until Thursday, June 7, 1906, at 10 o'clock a. m.

HOUSE OF REPRESENTATIVES, June 7, 1906.

The committee met at 10 o'clock a. m.

Present: Messrs. Olcott (chairman), Smyser, Barchfeld, Hay, and Wallace. Also Dr. White, Mr. Evans, Dr. Emmons, and others.

TESTIMONY OF DR. F. M. GUNNELL.

Dr. F. M. GUNNELL, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Dr. Gunnell, you are the chairman of the board of visitors of St. Elizabeth's, are you not?

Dr. GUNNELL. Yes, sir, I am.

The CHAIRMAN. And you are an officer of the United States Navy, are you not?

Dr. GUNNELL. I am a retired surgeon-general of the Navy.

The CHAIRMAN. How long have you been a member of the board of visitors of the asylum?

Dr. GUNNELL. I have been a member of the board of visitors for over twenty years; but I would like to say, Mr. Chairman, that my association with the institution extends over forty years. During the war the naval hospital was established at the asylum there for the little flotilla which ran between Washington and the bay, so as to blockade the Virginia shore, and I was put in charge of it. I was there from the 1st of January, 1863, until the end of the war. I resided in the hospital, and resided there two years and a half. I was very intimate personally with Dr. Nichols, the superintendent, and Dr. Godding, who was his assistant and his successor in charge of the hospital. Since 1885 I have been a member of the board of visitors, and within the last five years, through the courtesy of my associates, I have been president of the board. I have known all of the medical officers of the institution, Dr. Nichols, Dr. Godding, and Dr. Richardson very well, and during the time I was there the two years and a half, I went through the hospital with these gentlemen and their assistants constantly, looking at the manner in which they took care of everything.

The CHAIRMAN. You mean in the time of the war?

Dr. GUNNELL. In the time of the war, yes, but I meant to say that I have kept up my acquaintance and association. Dr. Nichols and Dr. Earle, who was his assistant, had been brought up by the Quakers with the idea which the Quakers introduced in the care of the insane, the treatment of gentleness and patience, and the absence of punishment or restraint of any kind, and that has been the rule of the institution ever since. Then of course within the last twenty years, I have been constantly a visitant there, and I notice that that old order is maintained there at the asylum. I want to say that one of the difficulties that occurred, and one of the only ones in the old time, was that occasionally an attendant would become impatient, and perhaps strike or manhandle a patient. When that occurred the punishment was immediate. That was the unpardonable sin. I remember that Dr. Nichols said one morning that he had had occasion to discharge one of his best men, a man whom he had brought from New York with him, because he had struck a patient. The man said he did it in self-defense, but it did not make any difference. No man can strike a patient in the hospital, with the knowledge of all the attendants there that he has struck him, without causing trouble, of course.

The CHAIRMAN. That condition of affairs obtains yet?

Dr. GUNNELL. That condition of affairs obtains yet. I think Dr. White has even gone a step farther, for I know that he has informed attendants that if there was any cruelty or roughness to patients he would hand the man over to the police—that he would not only discharge him, but would hand him over to the police on the charge of assault.

The CHAIRMAN. How often does the board of visitors meet?

Dr. GUNNELL. The board of visitors meets by statute, or by regulation, twice a year—in October and in April—and they meet at any other time when either the superintendent or two members of the

board desire to have them do so. We meet, I think, about four or five times a year. Dr. White has a record of the meetings, and he can tell you exactly. Then on the first Tuesday in every month three of the members of the board visit as inspectors. They go and spend the afternoon, or any other time, there. Then there is an executive committee, composed of myself as chairman and General Moore, of the Army, and Judge Maury and members, who at all times are in communication with the superintendent, and who audit the accounts of the institution. We have been in the habit of auditing them for the Treasury every month, but under a recent order of the Treasury Department it is now done every quarter.

The CHAIRMAN. Are reports made to you from the superintendent at your regular meetings?

Dr. GUNNELL. Full reports, written reports, are made at that time, which reports are preserved.

The CHAIRMAN. These reports consist not only of the financial reports, but also as to anything pertaining to the institution?

Dr. GUNNELL. Everything that occurs in the hospital.

The CHAIRMAN. The dismissal of employees, for instance?

Dr. GUNNELL. Everything that relates to the institution. Then, as to the service, the medical officers, their compensation, or their discharge and appointment, all that comes from the superintendent to the board, or to its executive committee.

The CHAIRMAN. How often did you say the executive committee meets?

Dr. GUNNELL. It meets to audit accounts now, every three months; but the executive committee meets at any time as a committee. Instead of calling the whole board together, the executive committee meets, and if it is necessary, we then summon the full board. The medical officers of this institution, not only the superintendents but their assistants, have been men of unusual merit, and six of the assistants have gone from the institution to be at the head of institutions in other parts of the country.

The CHAIRMAN. Has that happened recently, Doctor?

Dr. GUNNELL. I think about three years ago Dr. Foster—he was the last one to leave—went to Bangor, Me. It takes place every few years. Dr. Nichols was the superintendent who was selected by Miss Dix when Miss Dix made her application to the Senate for an appropriation to establish this hospital. The appropriation of, I think, \$50,000 was given and she was requested to select a superintendent. She selected Dr. Nichols, who was then at Bloomingdale as assistant, and brought in here. The Doctor remained here for twenty years, and when he left he was requested to name his successor and he named Dr. Godding, who was also here for twenty years. He was followed by Dr. Richardson, who was appointed by Mr. McKinley from Massillon, in Ohio. He had built that establishment, and when the doctor went off, as he did very suddenly—killed, I think, by the work that was piled upon him—Dr. White came. We did not know the Doctor except through his literary work, his writings. We knew all about him, of course, in that way, and I should like to say for myself and for the board that we regard Dr. White as not inferior to his predecessors in ability or in capacity for work or in his devotion to the institution.

Dr. Richardson—

The CHAIRMAN. Was Dr. White—

Dr. GUNNELL. Pardon me.

The CHAIRMAN. I was merely going to ask you whether he was appointed at the recommendation of the board of visitors?

Dr. GUNNELL. His name was submitted to the board with this literary work, but in the meantime Dr. White was so highly commended by the New York medical profession, the commissioner of lunacy there, that his appointment was made with the full approval, but without the knowledge of the board. When Dr. Richardson came here five years ago and went over the institution he found it in such a condition that he could make no estimates at all of the expenses involved. So we went before the Appropriations Committee. Mr. Cannon was then the head of the committee, and we told Mr. Cannon that unless he would go and look at the place that he and the committee could form no idea of what its needs were. So Mr. Cannon, Mr. Hemenway, and Mr. Ray, I think, of Mississippi, went over one afternoon and were taken through the place. There were 400 men, or men and women patients at that time, sleeping on mattresses on the floor, for want of room to accommodate them. Dr. Richardson was requested to make out his idea of what he thought ought to be done for the institution. He immediately recommended twelve cottages—to get away from the old four or five story prison-like building and distribute them in cottages about the grounds. When we came to count it up, we found it was over \$900,000, and I suggested to Dr. White that we should ask Mr. Cannon for a million. I said: "We won't get it, Doctor, but he has asked you to state what the necessities are, and I think we had better put it to him in the plainest language," and to our very great astonishment we got the million, and that was not enough.

Mr. Hitchcock then took the matter in hand and stated that as this money was going to be expended here he intended to have the advice of the best men in the country as to the kind of buildings and everything that relates to it, and he invited proposals and plans from Philadelphia, New York, and Boston, and finally the Shipley firm in Boston—perhaps the first architects in the country—made plans which were accepted; but before the 15 buildings could be commenced even the cost of materials and the cost of labor had so increased that only twelve buildings could be put up, and the others had to be provided for afterwards. But when Dr. Richardson died suddenly one day—broken down, I think, by the amount of work he undertook—Dr. White came here, and not a building was completed. All of the work of completing the buildings, of furnishing and installing, was left in Dr. White's hands, for Dr. Richardson had not even left a note to show what his plans were. All of that work came upon Dr. White, from the day he entered upon his work here, and he has done it with a degree of intelligence and devotion which has attracted the respect and admiration of the board, and he has its confidence.

I wanted to say one thing, Mr. Chairman, in regard to the Doctor's work there which the Doctor did not bring out plainly before you the other day. In his report he says he had 2,750 patients and about 700 attendants. That was the number on hand at the date the report was made. What the Doctor did not tell you was that there are changes of two or three patients there every day. There is a patient discharged there every day, from death or recovery or transfer, and they receive something like two patients a day; so that during the

time the Doctor has been there there have passed under his observation nearly 2,000 patients besides the 2,750 that are of record.

The CHAIRMAN. We, of course, understand that. I think that appears in one of Dr. White's statements.

Dr. GUNNELL. I asked the doctor if he mentioned that, and he said he did not think he had done so. As to inspection, in the old days, when everything was under one roof, the whole board would walk around, going through the quiet wards and looking at the patients; but since it has been extended until there are about 20 buildings all over the whole grounds—which you have seen—it has been absolutely impossible for the whole board to visit them, so that that parade of the nine members of the board and the doctors, which used to take place in a small space, had to be given up. But the full board, as I say, meets twice or oftener, and the inspection board, the three members on the board of inspection, meet every month, and they receive from the doctor an account of the patients, and then we visit some portions of the institution. We used always to go through the kitchen, but now when they have 7 kitchens we have not attempted to make that inspection, except in a very general sort of a way.

I want to say, too, if you please, Mr. Chairman, that after Dr. White came here, and before he had been here a year, complaints came to the board of bad food and wrong management, etc., and the board met and investigated the matter. The report of that board, I think, the doctor has read to you. It was drawn up by the Rev. Dr. Hamlin, one of our members, and the board found, after most careful examination, nothing that could be pointed as a fault, except that occasionally, perhaps, the meats were not as good as they desired, but the great question with the attendants always was fewer hours of labor and more money—a very natural request. When that request was made to Dr. Richardson himself, when he came here, he found that it would amount to some sixty-odd thousand dollars, I think, and he said pleasantly to the attendants, "If you can get Mr. Cannon to give us the money, I should be delighted to make these increases." The matter was dropped, and we heard nothing more of it at that time; and when this request came to us a lawyer came to make an appeal that under the civil-service rules the thing was wrong and improper, but that was not dealt with, because this investigation came up.

The CHAIRMAN. Who was that lawyer?

Dr. GUNNELL. He was a member of the firm in this city. What was the name of the lawyer—Mr. Siddons?

Mr. HAY. Mr. Siddons.

The CHAIRMAN. Yes; Mr. Siddons.

Dr. GUNNELL. When the newspapers published these charges against the institution I assembled the board immediately, and we were going to make an investigation, and the signers of that statement in the paper were requested to come before the board and assist in the investigation. They declined to do so, and procured us—for which we are very happy, indeed—this Congressional investigation. But in the meantime I went to work myself, carefully questioning all the medical officers of the institution, whom I knew very well, and the old attendants who have been there a long time, to point out anything in the world that might have escaped our notice that they thought ought to be corrected; and after a most careful investigation I could only find out that occasionally a patient had been rudely handled,

but that the attendant had always been discharged; and sometimes the food was not as good as they would like to have it, although they admitted it was generally good and abundant. I have frequently been in the dining room of the old soldiers, the ward on that side [indicating] where they have their own kitchen. I have been there when they have been having their meals, and it certainly is a very attractive show. The old fellows themselves always say that they have plenty. They want more tobacco, and would like to have a little whisky, but as a rule there was no complaint made.

In regard to the gentlemen on service there now, I should like to say a word. Dr. Stack has been there nearly thirty years, during the whole medical service, and a more competent and devoted man I have never seen. The doctor was acting superintendent for three months, after the death of Dr. Richardson, and was offered the nomination of this board for the position of superintendent, but he told me "what killed Dr. Richardson would kill me in three months. I could not stand it. I will do all of the professional work that comes up; I love that, but I can not undertake the management of this institution." Dr. Clark, too, was a man of excellent capacity, who was brought here by Dr. Richardson. Dr. Logie, and the lady physician there, Dr. O'Malley, are most excellent, and Dr. Blackburn, also. I have known them all ever since they have been here. In fact, I am not aware of anything to call the attention of the committee to. The committee is making a more careful examination now than we ourselves even made; but I am not able to state at this time any fault in the management of the institution or in the doctor who is at the head of it, or the attending medical officers there at all.

The CHAIRMAN. All right, Doctor. I think that is all, sir. Thank you.

Dr. GUNNELL. Thank you very much, Mr. Chairman.

If you will pardon me, you are perhaps aware of the constitution of the board. The board consists of a Surgeon-General of the Army, a Surgeon-General of the Marine-Hospital Service, a Surgeon-General of the Navy—almost all ex-officio members, although the law does not so provide—and we have also two ladies, Mrs. Gangewer and Mrs. Hubbard. The clergy is represented by the Rev. Doctor Hamlin, now in Europe. The law is represented by Judge Maury, here present. Then Dr. Magruder represents the profession in the city; and we also have one prominent business man. Mr. Kauffmann, of the Star, who lately died, was that man, and his vacancy has not been filled.

TESTIMONY OF MRS. GERTRUDE M. HUBBARD.

Mrs. GERTRUDE M. HUBBARD, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Mrs. Hubbard, you reside in the city of Washington, do you not?

Mrs. HUBBARD. I do. I reside just out of the city of Washington, at Twin Oaks, Washington.

The CHAIRMAN. And you are one of the board of visitors of St. Elizabeth's?

Mrs. HUBBARD. I have been for three or four years.

The CHAIRMAN. How frequently do you go there?

Mrs. HUBBARD. I think about every four months or three months, is it?

Dr. GUNNELL. Every three months.

Mrs. HUBBARD. Every three months, and then I attend the general meetings.

The CHAIRMAN. Is there anything particular in regard to the hospital that you would like to state to us?

Mrs. HUBBARD. I think I have nothing to add to what Dr. Gunnell has already stated and what has been stated.

The CHAIRMAN. You usually attend the regular meetings of the board of visitors?

Mrs. HUBBARD. I have always attended the meetings; yes.

The CHAIRMAN. And you hear the reports that are made by the superintendent?

Mrs. HUBBARD. Always, and I find them, with the rest of the board, entirely satisfactory.

The CHAIRMAN. I think that is all, Mrs. Hubbard. I do not think it is necessary for you to be obliged to remain here any longer.

Mrs. HUBBARD. I am much obliged to you.

TESTIMONY OF WILLIAM A. MAURY.

WILLIAM A. MAURY, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Judge Maury, you are a resident of Washington, are you not?

Mr. MAURY. I am, sir.

The CHAIRMAN. And one of the visitors of the St. Elizabeth's Hospital?

Mr. MAURY. I am.

The CHAIRMAN. How long have you been a member of that board?

Mr. MAURY. I have been a member of the board for upward of twenty years, and I will state, Mr. Chairman, that I have prepared a connected statement with reference to my connection with the board of visitors, and with reference to the character of the supervision of the board of visitors, and with the permission of the honorable committee I should like to read it.

The CHAIRMAN. We will be very glad indeed to have you do so, sir.

Mr. MAURY. This paper is entitled "A statement showing the character of the supervision of the board of visitors of the Government Hospital for the Insane, prepared by William A. Maury, a member of the board, for the information of the honorable committee on investigation."

The paper is as follows:

A statement showing the character of the supervision of the board of visitors of the Government Hospital for the Insane, prepared by William A. Maury, a member of the board, for the information of the honorable committee of investigation.

My connection with this hospital as a member of the board of visitors dates back some twenty years at least. My interest in it as a private individual goes back to its origin, for my father had much to do in assisting the philanthropist, Miss Dix, to induce Congress to establish the institution. I have heard the well-known philanthropist, Mr. Corcoran, of this city, relate that when he and my father went to the Capitol on a Sunday to try their persuasive powers on the House Appropriations Committee, then in session in favor of an appro-

priation for a hospital, they found the doors of the building locked, but were able to effect an entrance by climbing through a window, thanks to a friendly watchman, who knew their errand and told them the window could be opened from the outside, and then looked in another direction, like Nelson at Copenhagen, who, raising the spyglass to his blind eye, declared he couldn't see the signal to cease firing. After winning over the other members of the committee, they at last succeeded so far with the then watchdog of the Treasury, Hon. George W. Jones, of Tennessee, as to secure his promise that he would not object when the appropriation came up for consideration in the House; so it went through.

Another reason for my interest in the institution is that my brother-in-law, Dr. Charles H. Nichols, was its superintendent from the beginning until the year 1877, when he resigned to go to New York and become superintendent of the Bloomingdale Hospital, a branch of the great New York Hospital, a position he held until his death. I may add that Dr. Nichols passed successfully through the ordeal of a Congressional investigation of his administration of the hospital, but his high sensitive nature was deeply wounded by the slanderous charges and imputations that were heaped on him. It is a sad instance of retributive justice that the instigator of that investigation, who tried to supplant Dr. Nichols as superintendent, afterwards became his patient in the hospital and died there insane.

If the committee, when their deliberations begin, will turn to section 4842 of the Revised Statutes they will find that the board of visitors are required to visit the hospital at "stated periods," which requirement would seem to have a tendency to defeat the object of visitation by putting those subject to it on the alert. But it does not become us to be wiser than the law, and we are bound to presume that the experienced persons who drew the statute establishing the institution had a good reason for requiring the visitations to be made at known stated periods. But if we were at liberty to speculate as to the reason of this, we might say that it was the opinion of Miss Dix and others who had a hand in framing the statute that unexpected and sudden visitations might embarrass to some extent the administration of the hospital.

For many years after I became a member of the board of visitors and whenever I visited the hospital officially, my colleagues and I went through every ward and the more important outbuildings, and I don't think that in all my experience I ever saw anything irregular or that needed to be corrected, because everything was put in good presentable condition and, of course, no irregularities or abuses, if any existed, were on exhibition. This practice of going through all the wards of the hospital continued until recently, when it was found impossible during any stated visit to make the circuit of all the buildings and all the wards without fatigue amounting to exhaustion after the hospital had expanded to its great proportions. According to the practice which now obtains, the board of visitors after attending to the business which the superintendent lays before them for action visit some part or parts of the hospital, and I may say that since the improvements have been going on the attention of the board has been very considerably directed to viewing their progress and seeing how the patients get on that are housed in the new buildings.

When I first entered upon my duties as a visitor, I exercised my mind a good deal to devise some plan by which a more satisfactory knowledge of the working of the institution could be obtained than by visiting the wards at the stated periods as required by law. I then inclined to the view that, if legal, it was not desirable to disturb the administration of the hospital by unexpected visitations for the possible good that might result from them. But, however that may be, the problem came as near being satisfactorily solved as could be hoped for by Dr. James M. Toner, when he became president of the board.

The name of James M. Toner should never be mentioned in this community without reverence. His life was full of good works. His services at the hospital are commemorated by the building that bears his name, and the Toner section of the Library of Congress marks his benefaction to that institution.

Dr. Toner at once identified himself with the administration of the hospital. He established close relations between himself and the superintendent and his staff of physicians. Dr. Godding was then superintendent, and I don't believe he ever took an important step in the administration of the hospital without consulting Dr. Toner, and as Dr. Toner was in frequent touch and consultation with the individual members of the board they, through him, were kept all the time in close relations with the management of the hospital. Dr. Toner was a frequent visitor at the hospital, exercising watchfulness over all its operations and visiting at one time or another all its parts. Indeed, I don't see how his zeal and devotion could have been greater. He was unmarried, had a modest fortune, and had almost entirely withdrawn from the practice of his profession, so that he had abundant time to give to this public duty. There is no better clew to the character of this good man than the way in which he signalized his regard for the memory of Washington, by collecting and preserving new facts relating to him.

So close have been the three presidents—Dr. Toner, Dr. Sunderland, and Dr. Gunnell—to the administration of all the affairs of the hospital that it would not be out of the way to

designate each of them as practically a coadjutor superintendent of the Government Hospital for the Insane.

I may add that Dr. Gunnell's acquaintance with the Government Hospital for the Insane began some forty odd years ago, during the civil war, when, to meet the public exigency, accommodations had to be furnished there for a naval hospital, of which Dr. Gunnell was put in charge. St. Elizabeth's then became his home, as it were, so that it can be readily seen that the interest he feels in the institution as a visitor is blended with and strengthened by some degree of sentiment. Indeed, both the doctor and I have associations and memories connected with the hospital of a tender character, and this honorable committee must plainly see from what has been said that the nature of the service we render to the institution, to say nothing of that of our colleagues, is not to be judged of by counting on the fingers the number of wards we have perambulated at any one stated visit. And just here let me say that among the surprising things that have been said here from the witness stand is the statement of Mr. A. C. Hayden, that during his service of thirteen years as an attendant the board of visitors have never been through his ward. This witness seems, from the newspaper report, to have made a favorable impression, but he evidently speaks from a very defective memory, for it seems to me impossible that his statement should be correct. If now a witness of this character can be so grievously mistaken, what are we to think of similar statements made by other witnesses who do not commend themselves quite so well? This unfounded statement of Mr. A. C. Hayden, innocently made possibly, shows how cautiously such evidence should be received.

And what I have said with reference to Mr. Hayden's testimony is equally applicable to that of Miss Omahundra, who testifies that the board of visitors have never been through her ward during her eight years of service as an attendant, "as far as she could remember."

I know the president of the board, Dr. Gunnell, will support me in the statement that until recently he and I perambulated every part of the hospital, including the outbuildings, four or five times every year, twice with the whole board and at other times as members of monthly visiting committees, and he will also remember that toward the last Dr. Sunderland, the then president of the board, was compelled to give up making the grand rounds with the other members of the board for want of physical ability. I think that was the first intimation we had that we were making an indiscreet use of our strength without much, if any, good to the hospital. About such matters I can not be mistaken.

But the importance I have attached to the unique official relations that have so fortunately been kept up between the superintendents and the presidents of the board of visitors should not be interpreted to mean that the other members of the board have been less energetic for that reason. On the contrary, every member is prompt to report whatever comes to his or her knowledge through observation or the information of others affecting the management of the hospital that merits attention.

As soon as the recent charges against the management of the hospital appeared in the papers a special meeting of the board of visitors was promptly called for a certain day, at which time the persons responsible for the charges were summoned to be present. These persons having refused to attend, and the board being without power to compel them to do so, a bill was at once drawn to clothe the board with proper power, and was introduced in the Senate on the 26th of February, 1906. It is entitled "A bill to authorize the board of visitors of the Government Hospital for the Insane to summon and examine witnesses under oath, and making it a misdemeanor for any such witness to refuse to attend or testify or produce books and papers when summoned." This same bill was also introduced in the House of Representatives and passed the House with amendments and is now in the Senate, where it lies in abeyance awaiting the result of the present investigation.

Such is the history of the quiet and unobtrusive work of the board of visitors, which is none the less effective because it is not spectacular—a work which, as I have shown, has been done in a way that the founders of the hospital could not have reasonably expected, for experience tells us that such steady attention to duty is rarely given by trustees who are paid for their services, much less by those who render gratuitous service, as the members of the board of visitors do.

In conclusion I may add, that the "stated periods" for the meetings of the board of visitors are the annual meeting which takes place on the first Tuesday in October, and the semi-annual which takes place on the first Tuesday in April. In addition to these meetings, three members of the board of visitors visit the hospital on the first Tuesday in every month, and each member of the board is furnished with a printed roster showing who are assigned for duty for each month, saving, of course, the months when the board meets.

But it must not be supposed that members of the board do not visit the hospital at odd times and inspect it more or less. Such visits always occur during the year, and in the case of one of my colleagues they are frequent.

It gives me no little pleasure to bear this testimony to the work which is being done by the board of visitors, and I shall be more than compensated for the time and attention given to the preparation of this statement if it shall be the means of enlightening any who may think

that the highest duty of a board of visitors is to walk the hospital wards in search for abuses and irregularities as if such things were to be found on exhibition and open for inspection.

The CHAIRMAN. Judge, you spoke of having requested witnesses to attend before a meeting of the board of visitors. Can you tell me who it was that you asked to come?

Mr. MAURY. Well, now, my memory is somewhat at fault, but my impression is that it was Mr. Evans. That is the impression in my mind, that it was Mr. Evans and Dr. Emmons is it?

The CHAIRMAN. Yes.

Mr. MAURY. Those two gentlemen were asked to come, and they replied to our summons—that is to say, they sent a refusal in writing, and thereupon I drew this bill myself, which was introduced in the Senate and in the House.

Mr. HAY. Judge, have you any suggestions to make as to any change in the administration out at the hospital?

Mr. MAURY. Well, I have this to say, sir. Of course I have not much of a hospital experience, but I have this suggestion to make, and I am very glad the honorable Member put the question to me: That the committee in considering and reporting upon this mass of testimony will keep in mind the fact that the board of visitors is powerless to compel anybody to give attendance upon them, and we ask Congress to arm us with that authority, to compel the attendance of witnesses and to compel the production of books and papers.

I have not had any experience in that line, for we had no occasion to think of compulsory process until these charges were made, and then we were confronted with this difficulty and we had no power, and consequently I immediately sat down and drew this bill.

Mr. HAY. I did not mean about that. I meant as to the administration of affairs in the hospital by the authorities of the hospital.

Mr. MAURY. No, sir; I do not think I have.

The CHAIRMAN. Judge Maury, if you had this power to subpoena witnesses and to cause books to be produced, you would practically have the same powers that a lunacy commission would have as it is now in the several States. Is not that a fact?

Mr. MAURY. Now, while I know of the existence of lunacy commissions, etc., I do not know anything about their powers particularly.

Mr. SMYSER. Do you think, judge, that power ought to be given to this board of visitors?

Mr. MAURY. I think so, judge.

Mr. SMYSER. Or was it suggested simply by reason of what had happened during this Congress?

Mr. MAURY. In my experience—and we have had several important investigations before the board of visitors—never have we had the slightest difficulty in getting the attendance of anybody.

Mr. SMYSER. Up to this time?

Mr. MAURY. This is the first time. Our attention was never drawn to the subject before, and when our attention was drawn to the subject we adjourned for that day, or for two or three days, and the board directed that I should look into the law on the subject and I did so. I found that there was no legal sanction or power to summon witnesses, and therefore I went to the great source of power—the Congress of the United States. Senator Spooner and I had some conversation upon the subject, and Mr. Spooner thought that it was too much power to

give us, and that it was practically investigating ourselves. Well, in respect to this particular case it might have been so, but then there are many cases which the board of visitors have to deal with where there is no reason whatever for imputing any delinquency to them at all, don't you observe? While, of course, it might not be fruitful for the board of visitors to be conducting such an investigation as this, because there would be always a large number of people who would say they were investigating themselves, and all that sort of thing, of course it is proper that it should be in the hands of this great committee.

Mr. HAY. What do you think would be the advisability of having a lunacy commission for the District of Columbia?

Mr. MAURY. Well, I really do not know. Do you mean a regular established——

Mr. HAY. Lunacy commission; yes, sir; such as we have in the States.

Mr. MAURY. With a view, perhaps, to a more thorough inspection and investigation than the board of visitors could give, do you mean?

Mr. HAY. Yes.

Mr. MAURY. Well, inasmuch as there are so many precedents for it, of course I could say nothing against it. I have thought sometimes that—well, if it were possible there might be an investigation of this hospital. We all require examination——

Mr. HAY. Exactly.

Mr. MAURY. There is not one of us, except the committee [laughter] that does not require examination.

Mr. HAY. Including yourself, too?

The CHAIRMAN. We do in other capacities, but not as a committee.

Mr. MAURY. I was going to suggest this: If the hospital could be subjected to the same scrutiny that a national bank is and could have somebody come down upon it without a moment's notice, that might be done, and still the board of visitors would have a useful function also.

Mr. HAY. Certainly; because as I understand your construction of the law, you have to make your visits at stated periods, and those stated periods have necessarily to be known to the authorities of the hospital?

Mr. MAURY. Certainly, and if we were to go at other periods they would not be prepared for us, perhaps, and it would upset the administration, and perhaps be an inconvenience. At any rate it has occurred to me that if the Surgeon-General of the Army and the Surgeon-General of the Navy, or both together, could, whenever they saw fit—I do not know what Dr. White will think of this now—if they could send one of their investigators or examiners into the hospital and go right through it, as a bank examiner goes through a national bank, it might be a good thing.

Mr. HAY. Or just as an army officer goes through to inspect any general hospital in the Army.

Mr. MAURY. Surely. This business of going through hospitals, you know, walking through hospitals, is a farce.

Mr. HAY. Of course it is.

Mr. MAURY. There is one thing about this, which Dr. Gunnell was too modest to state. We have the president of the board of visitors, who is right intimately associated with the superintendent of the hos-

pital and knows all the details of his movements. I do not suppose there is a day that Dr. Gunnell is not in communication over the telephone with Dr. White, and it was so with Dr. Toner. In my judgment it is an ideal supervision. I do not believe there is another hospital in the United States which has it. We have happened to have gentlemen at the head of the board of visitors who have the leisure and inclination and love of the thing to do it.

Mr. HAY. In regard to the operations of the farm, and the other financial operations, would it not be a good thing, as you suggested, to have some man, just as the man who visits the banks—

Mr. MAURY. Certainly.

The CHAIRMAN. I would like to call attention to the fact that the Treasury Department does have the power, and does send people to audit the accounts.

Mr. HAY. Yes, to audit the accounts; but there are other things besides auditing the accounts. Judge, what do you think of the power of the superintendent, who has, I believe, practically the power I am going to speak of, to appoint 700 employees and to fix their salaries?

Mr. MAURY. With the approval of the board of visitors.

Mr. HAY. With the approval of the board of visitors?

Mr. MAURY. He must do that. He must have the approval of the board of visitors.

Mr. HAY. That is a question, I think, under the law?

Mr. MAURY. That is the practical interpretation of the law.

Mr. HAY. I presume the board has necessarily to relegate to the superintendent the employment of these various people?

Mr. MAURY. Oh, naturally, yes.

Mr. HAY. The board could not undertake to do it?

Mr. MAURY. Oh, no.

Mr. HAY. Nor does the statute contemplate that the board should undertake to examine into the qualifications of all of the different employees of the hospital?

Mr. MAURY. No.

Mr. HAY. What do you think is the effect of giving to one man—and I am not speaking of Dr. White especially, but any man—the power of employing 700 employees and practically fixing their compensation?

Mr. MAURY. As to the employment, I should say that in the interest of good administration, and with the tremendous responsibility which Dr. White carries on his shoulders, it seems to me that he should choose the agencies through which he executes his work. Otherwise there would be at once friction and trouble.

Mr. HAY. Well, now, as to fixing the compensation?

Mr. MAURY. That is done with the approval of the board of visitors always. Of course, while we look primarily to Dr. White for information, still we never increase anybody's salary and never exercise this power unless we have data before us which authorizes the action.

Mr. HAY. The superintendent has testified that he has created places there—various places. Dr. Clark, for instance, has been placed in a position which Dr. White testified he created. Then there have been some other places—some men in charge of some

departments. He said he created them. Were they created by him, or was that approved of by the board, or do you know?

Mr. MAURY. I am sure it must have been; yes, sir. Such an appointment as that of Dr. Clark's, who was originally brought there by Dr. Richardson—I remember, of course, that we acted upon that. Nothing of that kind would ever be done without our action and without our possession of all the facts.

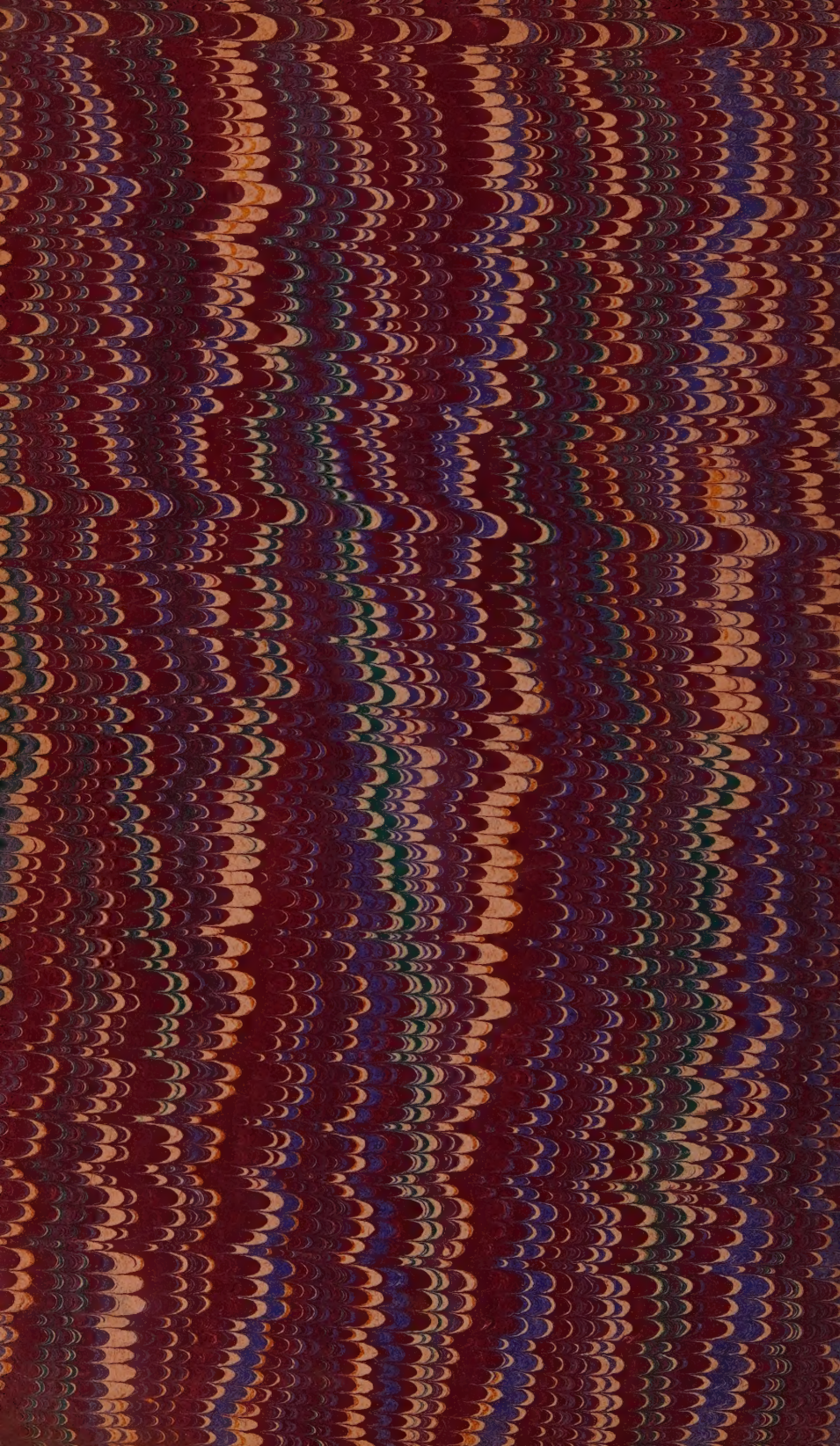
Mr. HAY. And you aided in fixing his salary, too?

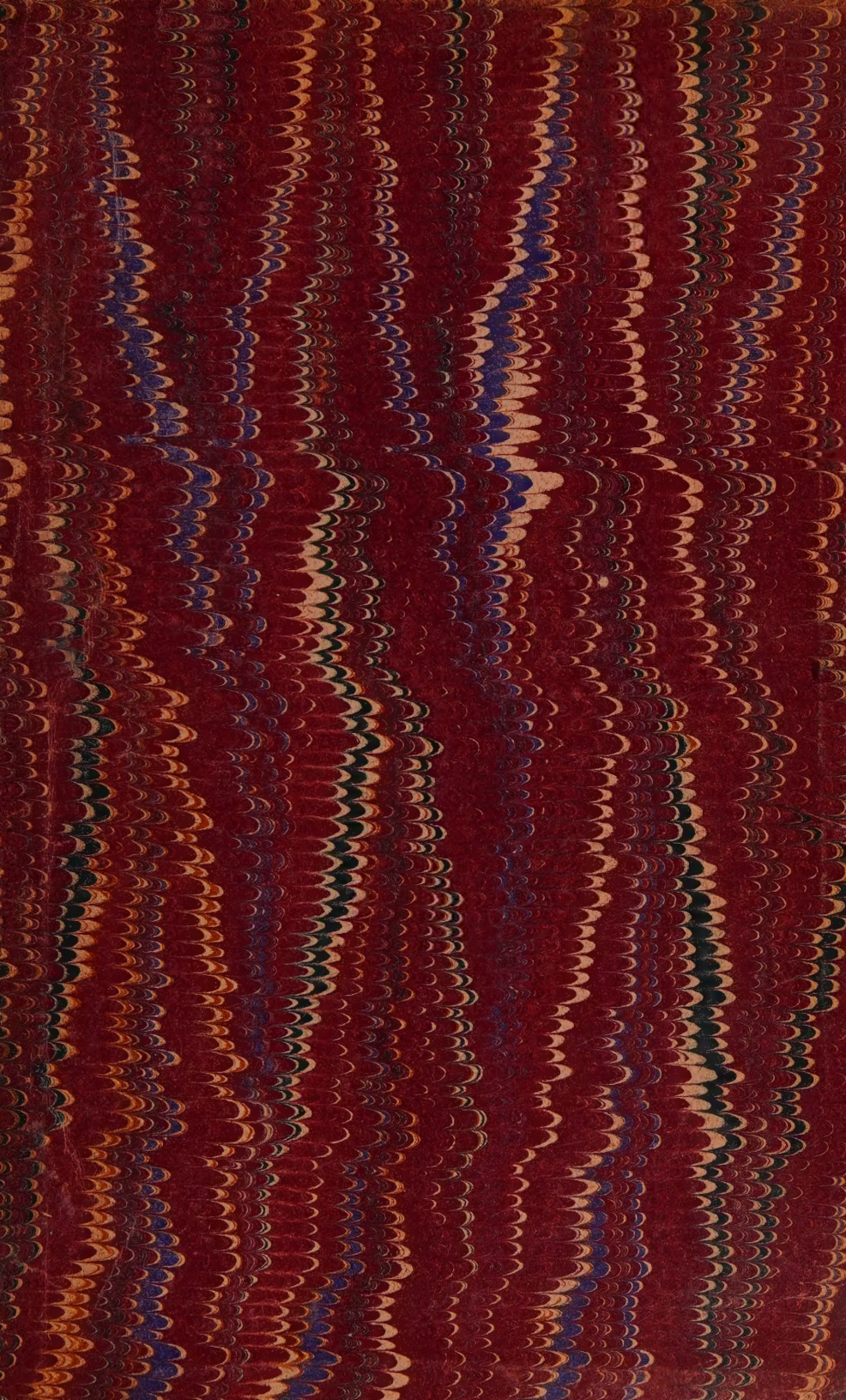
Mr. MAURY. I think so; I think so. I hope we did not make it too big.

Mr. HAY. Not at all; no, sir. I think it is a very reasonable salary for what he has to do.

The CHAIRMAN. I think that is all, Judge.

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